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THE HENRY J. KAISER FAMILY FOUNDATION
THE COMMONWEALTH FUND

AMERICANS' HEALTH CARE CONCERNS: A NATIONAL SURVEY

April 8, 1992

Based on a national survey conducted for The Henry J. Kaiser Family Foundation and The Commonwealth Fund between January 31 and February 24, 1992, by Louis Harris and Associates, Inc., of 2,000 persons aged 18 and older.

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News Release

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AM PAPERS APRIL 8, 1992

THE HENRY J. KAISER FAMILY FOUNDATION

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Editors: This is for release AM Wednesday, April 8, 1992. Contacts are Matt James at 202-347-5270 (Kaiser Family Foundation), and Penny Duckham at 212-535-0400 (Commonwealth Fund).

SURVEY SHOWS WIDESPREAD PUBLIC CONCERN ABOUT HEALTH INSURANCE COVERAGE AND COSTS

Most Look to the Federal Government for Solutions
Public is Divided on the Options for Reform
Sees No Candidate with the Answer Right Now

WASHINGTON, D.C.--A new national survey reveals widespread public fear about the rising costs of health insurance and the erosion of health care benefits. Substantial numbers of Americans report serious problems paying for care.

The survey found that the public expects the federal government, not state government or the private sector, to take the lead in assuring that health insurance is provided to all Americans and in controlling costs.

The results show that health could be one of the most important issues in the upcoming presidential election. The dominant issue will be the economy, named by one-half of the public as the issue that will determine their vote. However, health emerged as the number two issue, named by one-quarter of the public, with virtually equal proportions of Republicans, Democrats and Independents saying it will help determine their vote. No other issue was named by more than 11 percent of the public.

At this point, the public sees no real difference between the health reform proposals of any party or candidate, and Americans are about evenly divided on the three leading options for health insurance reform, play-or-pay, single-payor, and the President's tax credit approach, the survey found.

"A near majority of American families with health insurance are now deeply concerned they will not be able to pay for needed medical care, particularly in the event a major medical problem strikes a child, a parent, or a spouse," said Thomas W. Moloney, Senior Vice President of the Commonwealth Fund.

"People are saying clearly that it is the federal government they want to solve this problem, and that health will be on their minds when they vote for President. The question is whether any candidate can articulate a proposal that will win widespread support and tap this concern," said Drew Altman, President of the Henry J. Kaiser Family Foundation.

- More -

The 2,000-person national random sample survey was conducted for the Kaiser Family Foundation and the Commonwealth Fund by Louis Harris and Associates. The survey was conducted between January 31 and February 24, 1992. The two foundations will repeat this survey in 1993.

Among the key findings are:

Concern Over Health Insurance Found Throughout Population

* Sixty-one percent of Americans are concerned that health insurance will become so expensive that they won't be able to afford it.

* One out of every two insured Americans is worried that benefits under their current health plan will be cut back substantially.

* More Americans (50 percent) are worried that they will have to pay very expensive medical bills which are not covered by health insurance than that they or their spouse will lose their job (33 percent).

Significant Numbers of Americans Are Having Problems Getting Medical Care

* Approximately 23 million Americans needed medical care but did not get it in the last 12 months. Approximately 18 million could not get medical care for financial reasons.

* Last year, 54 million people postponed care they thought they needed for financial reasons.

* About 7 million Americans were denied health insurance because of a prior medical condition.

* Nearly 22 million Americans said they themselves, or someone else in their family, or both, had been refused health care during the last year because they didn't have insurance or couldn't pay.

The Public Wants the Federal Government, Not State Government or the Private Sector, to Take the Lead in Health Reform

* Sixty percent of Americans say they want government to play the primary role in providing health insurance to all Americans and in controlling costs. By contrast, 34 percent want the private sector to play the primary role.

* Sixty-two percent want the federal government, and 30 percent state government, to take the lead in changing the health care system.

- More -

Voters Say Health Care Will Be On Their Minds When They Cast Ballots for President and Congress

* When asked to name the two issues that will be most important in determining how they will vote for President and Congress, respondents named the economy as the dominant issue (cited 50 percent of the time). Health care (25 percent) ranked second, far ahead of all other major issues--taxes (11 percent), jobs (8 percent), and education (7 percent). The public said that health will be much less important in state and local elections.

Americans Divided Over the Major Health Care Reform Options

* There is no clear preference as to which major reform option the American public supports. Play-or-pay garnered support from 33 percent, single-payor was backed by 30 percent, and the President's tax credit approach was favored by 27 percent.

No Candidate or Party Received A Strong Public Endorsement for Their Health Reform Plan

* Only 16 percent of Americans reported that they saw any real difference between the health care reform proposals of the Republicans and Democrats. Sixty-eight percent said they saw no difference.

* When asked if there is any candidate or political leader whose health care reform proposal they support, 4 out of 5 Americans said "no"; 5 percent named President Bush; 2 percent Governor Clinton. Neither Governor Brown nor Pat Buchanan registered any support.

The Kaiser Family Foundation is a national philanthropy based in Menlo Park, California devoted to improving health in the United States and South Africa. It is not associated with Kaiser hospitals or Kaiser Permanente. The Commonwealth Fund, established in 1918, is a national philanthropy located in New York City. Its main programs focus on health, education, and workforce issues.

Methodology

This survey of a 2,000-person national cross-section of American adults aged 18 years and older, was conducted between January 31 and February 24, 1992. All interviews were conducted by telephone from the Louis Harris and Associates office in New York City. The sample is chosen to represent the true proportion of the population living in different regions of the country and those living in metropolitan and non-metropolitan areas. The data is also weighted to the Census Bureau's latest population parameters on sex, race, age, education and insurance status. It has a margin of error of plus or minus 2 percent.

THE HENRY J. KAISER FAMILY FOUNDATION

The Henry J. Kaiser Family Foundation in Menlo Park, California is one of the nation's largest private foundations devoted exclusively to health. Established in 1948 by industrialist Henry J. Kaiser and his wife Bess, the Foundation now has assets of approximately $400 million. It is not associated with Kaiser hospitals or the Kaiser Permanente Medical Care Program.

The Foundation makes more than $23 million in philanthropic expenditures each year. Grants focus on helping make government more responsive to the health needs of the American people, improving the health of low-income and minority groups, and developing a more equitable and effective health care system in South Africa. A further interest is to promote innovation and reform in the Foundation's home state of California.

Grants support a range of activities, including policy analysis, applied research to define and measure public health problems, demonstration and pilot projects, and communications activities that help sharpen the health care debate. Program areas are:

Government and Health

We support projects that help make the public sector more effective in addressing the nation's health problems – promoting critical thinking about government programs and helping government explore fundamental changes in policy and management.

Priorities are to strengthen the policymaking process, chart new directions for public programs in health, and strengthen the role of the states in health. A further priority is to develop public sector leadership in health.

Poverty and Health

The Foundation supports projects that show promise of reducing the serious gap between the health of the disadvantaged and the general population.

Priorities are to strengthen the delivery of basic health services and promote health and prevent disease among low-income and minority Americans, and to improve access to health care for the uninsured. A new focus of the Poverty and Health program is to improve reproductive health in America, with an emphasis on strengthening contraceptive and family planning services.

Health and Development in South Africa

In its one program outside the United States, the Foundation supports efforts t shape a new and more equitable national health care system in South Africa.

California Grants

This program supports California-based efforts of statewide and national significance, as well as projects within the San Francisco Bay Area. The Foundation has a special interest in projects that promise to benefit vulnerable populations, that can contribute to systems reform, and that have potential to affect state and federal policy.

More Minorities in the Health Professions

Demonstration and evaluation projects are under way to prepare increased numbers of low-income, minority students for college and post-college studies appropriate for entry into the health professions.

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THE
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HARKNESS HOUSE ONE EAST SEVENTY-FIFTH STREET, NEW YORK, N.Y. 10021-2692 (212) 535-0400 FAX (212) 249-1276

Fact Sheet

Established	1918 by Anna M. Harkness 4th oldest foundation in the United States
Mission	To enhance the common good by looking for new opportunities to improve the health and well-being of Americans and to assist specific groups of Americans who have serious and neglected problems.
Endowment	$340 million one of the 50 largest U.S. foundations
Grants	$10,200,000 in grants, year ended June 30, 1990
Current Programs	IMPROVING HEALTH CARE SERVICES Improving the Appropriateness of Medical Care Building the Future of Geriatrics The Picker/Commonwealth Fund Patient-Centered Care Program The Graduate Program in Nursing and Management Rethinking Physical Restraints in Nursing Homes ADVANCING THE WELL-BEING OF ELDERLY PEOPLE Americans Over 55 at Work Program The Commonwealth Fund Commission on Elderly People Living Alone The Commonwealth Fund Research Program on the Problems of Aging DEVELOPING THE CAPACITIES OF YOUNG PEOPLE The Career Beginnings Program Developing Youth Apprenticeship Projects Understanding Young Black Male High School Dropouts PROMOTING HEALTHIER LIFESTYLES Massachusetts Saving Lives Program IMPROVING THE HEALTH OF MINORITIES Fellowship Program in Academic Medicine for Minority Students IMPROVING THE QUALITY OF URBAN LIFE Improving the Quality of Life in New York City HARKNESS FELLOWSHIPS PROGRAM
Location	Harkness House, One East Seventy-Fifth Street New York, NY 10021-2692 Tel.: (212) 535-0400
Chairman	C. Sims Farr
President	Margaret E. Mahoney

# # #

January 23, 1992

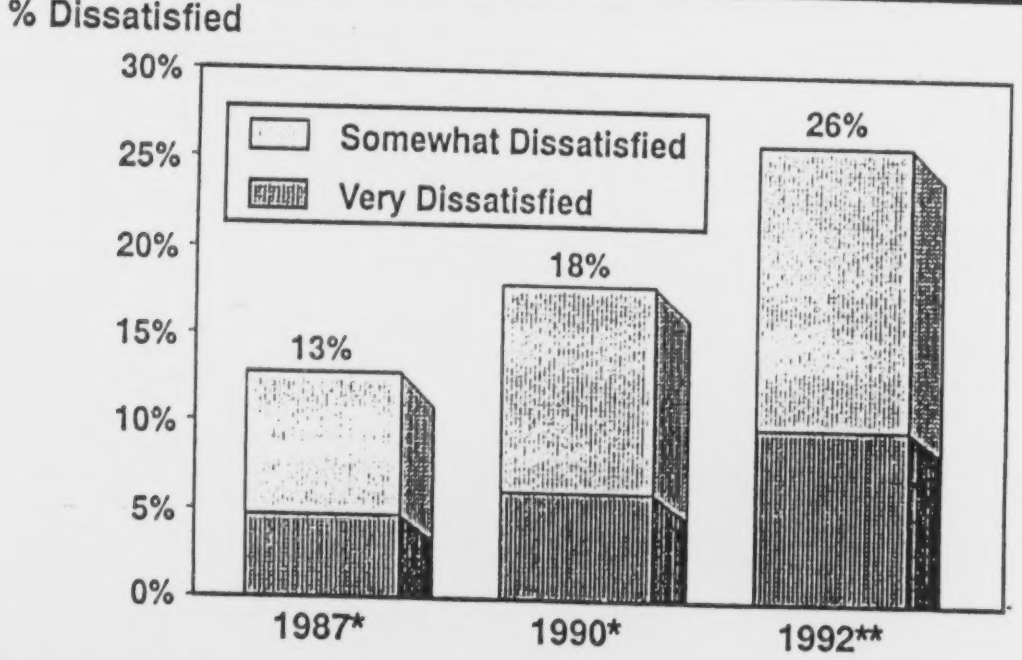
SUMMARY OF SURVEY FINDINGS

OVERALL, HOW DO YOU FEEL ABOUT THE HEALTH CARE SERVICES YOU AND YOUR FAMILY HAVE USED IN THE LAST FEW YEARS?

	1987*	1990*	1992**
Very/Somewhat Satisfied	84%	79%	71%
Very/Somewhat Dissatisfied	13%	18%	26%
Not Sure/Refused	3%	3%	3%

* Source: Louis Harris Surveys 1987, 1990
** Source: Kaiser/Commonwealth Health Insurance Survey 1992

AMERICANS ARE INCREASINGLY DISSATISFIED WITH THEIR HEALTH CARE.



* Harris Survey 1987, 1990

** Kaiser/Commonwealth Health Insurance Survey 1992

I WILL READ YOU A LIST OF THINGS THAT PEOPLE WORRY ABOUT. PLEASE SAY FOR EACH ONE IF IT IS SOMETHING YOU WORRY ABOUT A GREAT DEAL, QUITE A LOT, NOT MUCH OR NOT AT ALL.

	A Great Deal/ Quite a Lot
...that health insurance will become so expensive you won't be able to afford it?	61%
...that you will have to pay very expensive medical bills not covered by health insurance?	50%
...that you will not be able to get the health care you need when you are very ill because you can't afford it?	48%
...that your benefits under your current health care plan will be cut back substantially?	48%
...that if you have large medical bills, your health care plan will refuse to insure you?	39%
...that your employer's health care costs will limit your wage increases?	31%
...that your employer will stop providing you with any health insurance?	26%
Answered at least one of the above: A Great Deal/or Quite a Lot	82%
Compared with other major concerns	
...that you will not be able to maintain your standard of living?	50%
...that you or your spouse will lose your job in 1992?	33%

Source: Kaiser/Commonwealth Health Insurance Survey 1992

DURING THE LAST YEAR HAVE YOU OR HAS ANY MEMBER OF YOUR FAMILY BEEN REFUSED HEALTH CARE BECAUSE YOU DIDN'T HAVE INSURANCE OR YOU COULDN'T PAY?

% Answering YES to Respondent, Family or Both:	Total
Overall	12%
Income:	
Less Than $15,000	16%
$15,000 - $50,000	11%
Over $50,000	10%
Private Insurance	11%
Medicaid	14%
Uninsured	19%

Source: Kaiser/Commonwealth Health Insurance Survey 1992

IN THE LAST 12 MONTHS HAVE YOU EVER PUT OFF OR POSTPONED SEEKING HEALTH CARE WHICH YOU FELT YOU NEEDED BECAUSE YOU COULD NOT AFFORD IT?

% Answering YES:	Total
Overall	30%
Income:	
Less Than $15,000	39%
$15,000 - $50,000	31%
Over $50,000	19%
Private Insurance	24%
Medicaid	26%
Uninsured	67%

Source: Kaiser/Commonwealth Health Insurance Survey 1992

IN THE PAST 12 MONTHS WAS THERE A TIME WHEN YOU NEEDED MEDICAL CARE BUT DID NOT GET IT?

% Answering YES:	Total
Overall	13%
Income:	
Less Than $15,000	20%
$15,000 - $50,000	12%
Over $50,000	7%
Private Insurance	8%
Medicaid	13%
Uninsured	37%
For those answering YES, what was the main reason?	
Cost Too Much/Not Covered	77%
Could Not Get Appointment	2%
Didn't Know Clinic/Doctor	1%
Not Easy to Get to Physician's Office	1%
All Others	15%
Not Sure	4%

Source: Kaiser/Commonwealth Health Insurance Survey 1992

IN THE LAST YEAR ABOUT HOW MUCH HAVE YOU AND YOUR FAMILY HAD TO PAY OUT-OF-POCKET FOR MEDICAL BILLS WHICH WERE NOT COVERED BY INSURANCE?

	Total	Private Insurance	Medicaid	Uninsured
Nothing	22%	21%	44%	16%
$200 or Less	21%	23%	13%	12%
$201 - $500	20%	21%	17%	21%
$501 - $1,000	14%	15%	5%	18%
$1,000 and Over	16%	14%	11%	31%

Source: Kaiser/Commonwealth Health Insurance Survey 1992

IN THE PAST 12 MONTHS WAS THERE A TIME WHEN ONE OF YOUR CHILDREN 17 YEARS OLD OR YOUNGER NEEDED MEDICAL CARE BUT DID NOT GET IT?

% Answering YES:	Total
Overall	3%
Income:	
Less Than $15,000	3%
$15,000 - $50,000	4%
Over $50,000	1%
Private Insurance	3%
Medicaid	2%
Uninsured	7%
For those answering YES, what was the main reason?	
Cost Too Much/Not Covered	79%
Could Not Get Appointment	3%
Didn't Know Clinic/Doctor	5%
No Transportation/Too Far	2%
All Others	8%
Not Sure	5%

Source: Kalser/Commonwealth Health Insurance Survey 1992

BEFORE YOU AND YOUR FAMILY RAN UP THESE MEDICAL BILLS, DID YOU KNOW THAT THEY WOULD NOT BE COVERED BY INSURANCE, OR DID YOU EXPECT INSURANCE TO PAY MUCH MORE OF THESE COSTS?

For those who had out-of-pocket costs of $2,000 or more:

	Total	Private Insurance	Medicaid	Uninsured
Knew Costs Were Not Covered	59%	53%	45%	73%
Expected Insurance to Pay Much More	36%	43%	55%	21%
Not Sure/Refused	5%	4%	0%	5%

Source: Kaiser/Commonwealth Health Insurance Survey 1992

IF YOU WERE OFFERED A DIFFERENT HEALTH PLAN WHICH LIMITED YOUR AND YOUR FAMILY'S CHOICE OF DOCTORS AND HOSPITALS IN RETURN FOR REAL SAVINGS IN YOUR OUT-OF-POCKET COSTS, HOW INTERESTED WOULD YOU BE IN CHANGING TO THIS PLAN?

	Total	Private Insurance	Medicaid	No Insurance
Very Interested/Somewhat Interested	55%	53%	48%	63%
Not Very Interested/Not at All Interested	43%	45%	45%	33%
Not Sure/Refused	3%	2%	7%	5%

Source: Kaiser/Commonwealth Health Insurance Survey 1992

IN A MEDICAL EMERGENCY WOULD YOU FEEL FINANCIALLY RESPONSIBLE TO HELP PAY THE MEDICAL BILLS OF A FAMILY MEMBER WHO CURRENTLY DOES NOT HAVE HEALTH INSURANCE?

	Total
YES	51%
NO	47%
For those answering YES:	
Private Insurance	48%
Medicaid	55%
Uninsured	69%
Who is that person?	
Child	38%
Parent	27%
Sibling	13%
Spouse	10%
Income:	
Less Than $15,000	3%
$15,000 - $50,000	4%
Over $50,000	1%

Source: Kaiser/Commonwealth Health Insurance Survey 1992

IS THERE A HEALTH PLAN THROUGH WHICH YOU AND YOUR FAMILY COULD GET THE HEALTH CARE YOU NEED WHICH IS LESS EXPENSIVE THAN THE WAY YOU DO IT NOW?

	Total	HMO Members	Non-HMO Members
YES	9%	7%	9%
NO	78%	83%	78%
Not Sure/Refused	13%	10%	13%

Source: Kaiser/Commonwealth Health Insurance Survey 1992

HAVE YOU EVER TAKEN STEPS TO FIND A LESS EXPENSIVE WAY OF GETTING HEALTH CARE SERVICES OR NOT?

	Total	Private Insurance	Medicaid	No Insurance
YES	45%	41%	18%	86%
NO	54%	58%	82%	14%
Not Sure/Refused	1%	1%	0%	0%

Source: Kaiser/Commonwealth Health Insurance Survey 1992

A SIGNIFICANT NUMBER OF AMERICANS ARE HAVING DIFFICULTY GETTING THE CARE THEY FEEL THEY NEED.

Approximately 23 million Americans said that they needed medical care but did not get it in the last 12 months. Approximately 18 million said they could not get medical care for financial reasons.

Last year, 54 million people said they postponed care they thought they needed for financial reasons.

About 7 million Americans report that they were denied health care insurance because of a prior medical condition.

Nearly 22 million Americans said they themselves, or someone else in their family, or both, had been refused health care during the last year because they didn't have insurance or couldn't pay.

Source: Kaiser/Commonwealth Health Insurance Survey 1992

WHO SHOULD HAVE THE PRIMARY ROLE IN PROVIDING HEALTH INSURANCE TO ALL AMERICANS AND CONTROLLING HEALTH COSTS?

	Total	Rep	Dem	Ind
Government	60%	52%	69%	62%
Private Sector	34%	43%	26%	35%
Not Sure/Refused	6%	5%	6%	4%

Source: Kaiser/Commonwealth Health Insurance Survey 1992

IF IT'S A CHOICE BETWEEN THE FEDERAL GOVERNMENT OR THE STATE GOVERNMENTS, WHICH DO YOU THINK SHOULD TAKE THE LEAD IN CHANGING THE HEALTH CARE SYSTEM?

	Total	Rep	Dem	Ind
Federal	62%	59%	64%	62%
State	30%	33%	28%	29%
Both Federal and State	3%	3%	3%	3%
Neither	1%	1%	1%	2%
Not Sure/Refused	4%	3%	4%	4%

Source: Kalser/Commonwealth Health Insurance Survey 1992

LOOKING AT THE PROBLEMS YOU SEE WITH OUR HEALTH CARE SYSTEM, WHICH GROUP OR GROUPS DO YOU THINK ARE MAINLY TO BLAME?

	Total	Rep	Dem	Ind
Government	31%	29%	33%	33%
Doctors	25%	27%	24%	26%
Insurers	23%	25%	22%	25%
Hospitals	15%	17%	14%	16%
All Others Mentioned	25%	26%	24%	25%

Source: Kaiser/Commonwealth Health Insurance Survey 1992

THE NEXT PRESIDENTIAL ELECTION WILL BE IN NOVEMBER 1992. WHAT TWO ISSUES DO YOU THINK WILL BE OF MOST IMPORTANCE TO YOU IN DETERMINING WHO YOU WILL SUPPORT?

Issue:	Total	Rep	Dem	Ind
The Economy	50%	55%	46%	51%
Health Care	25%	24%	27%	24%
Taxes	11%	12%	10%	11%
Jobs	8%	6%	10%	8%
Education	7%	8%	8%	7%
Foreign Policy/Aid	5%	7%	3%	6%
Abortion	4%	5%	3%	4%

Source: Kaiser/Commonwealth Health Insurance Survey 1992
(Total responses exceed 100% because respondents were asked to name two issues)

WHAT TWO ISSUES DO YOU THINK WILL BE OF MOST IMPORTANCE TO YOU IN DETERMINING WHO YOU WILL SUPPORT IN THE PRESIDENTIAL ELECTION IN NOVEMBER 1992?

% Citing Health as One of Top Two Issues:	Total
	25%
Age:	
18 - 29	16%
30 - 39	22%
40 - 49	30%
50 - 64	31%
65 and Over	32%

Source: Kaiser/Commonwealth Health Insurance Survey 1992
(Total responses exceed 100% because respondents were asked to name two issues)

WHAT TWO ISSUES WILL BE OF MOST IMPORTANCE TO YOU IN DECIDING WHICH CONGRESSMAN OR SENATOR TO SUPPORT?

Issue:	Total	Rep	Dem	Ind
The Economy	34%	38%	32%	36%
Health Care	19%	17%	23%	19%
Taxes	12%	16%	10%	13%
Education	11%	11%	12%	11%
Jobs	6%	5%	8%	5%

Source: Kaiser/Commonwealth Health Insurance Survey 1992

WHAT TWO ISSUES WILL BE OF MOST IMPORTANCE TO YOU IN DECIDING WHO YOU WILL SUPPORT FOR GOVERNOR OR STATE REPRESENTATIVE?

Issue:	Total	Rep	Dem	Ind
The Economy	29%	33%	27%	30%
Education	21%	24%	22%	19%
Taxes	20%	26%	15%	21%
Health Care	11%	8%	14%	12%
Jobs	8%	6%	10%	9%

Source: Kaiser/Commonwealth Health Insurance Survey 1992

WHICH OF THE FOLLOWING WAYS OF FINANCING HEALTH CARE WOULD YOU FAVOR?

Options for Reform:	Total	Rep	Dem	Ind
Play-or-Pay	33%	30%	36%	33%
Single-Payor	30%	27%	33%	30%
Tax Credit Plan	27%	32%	21%	27%
Leave Things the Way They Are	2%	2%	0%	2%
Not Sure/Refused	8%	8%	9%	8%

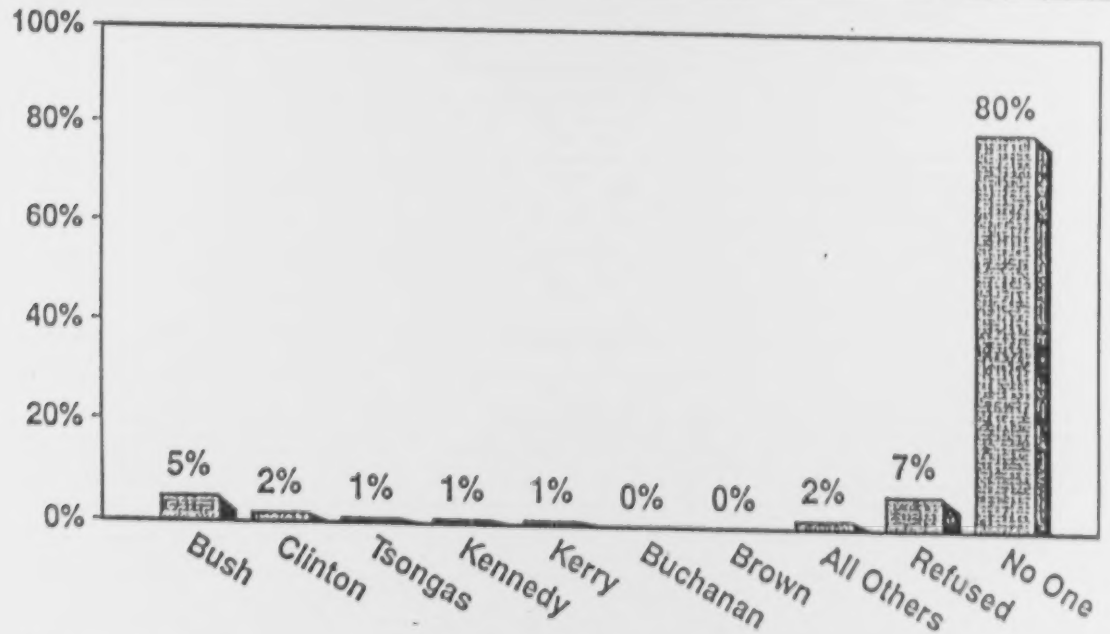
Source: Kaiser/Commonwealth Health Insurance Survey 1992

DO YOU SEE ANY REAL DIFFERENCE BETWEEN THE HEALTH CARE REFORM PROPOSALS OF THE REPUBLICANS AND THE DEMOCRATS OR NOT?

	Total	Rep	Dem	Ind
See Real Difference	16%	16%	19%	15%
See No Real Difference	68%	69%	67%	70%
Not Sure/Refused	16%	15%	14%	15%

Source: Kaiser/Commonwealth Health Insurance Survey 1992

CAN YOU THINK OF ANY POLITICAL LEADER OR CANDIDATE WHOSE PROPOSALS FOR HEALTH CARE REFORM YOU SUPPORT?



Source: Kaiser/Commonwealth Health Insurance Survey 1992

SHOULD THE GOVERNMENT SET THE RATES THAT INSURERS CAN CHARGE FOR HEALTH PREMIUMS?

	Total	Rep	Dem	Ind
Agree Strongly/Agree Somewhat	75%	74%	78%	75%
Disagree Somewhat/Disagree Strongly	22%	25%	20%	23%
Not Sure/Refused	3%	2%	2%	2%

Source: Kaiser/Commonwealth Health Insurance Survey 1992

SHOULD THE GOVERNMENT SET THE RATES THAT DOCTORS AND HOSPITALS CHARGE PATIENTS?

	Total	Rep	Dem	Ind
Agree Strongly/Agree Somewhat	71%	69%	74%	74%
Disagree Somewhat/Disagree Strongly	27%	30%	25%	25%
Not Sure/Refused	2%	1%	2%	2%

Source: Kaiser/Commonwealth Health Insurance Survey 1992

SHOULD THE GOVERNMENT SET THE PRICES FOR PRESCRIPTION DRUGS?

	Total	Rep	Dem	Ind
Agree Strongly/Agree Somewhat	73%	69%	77%	74%
Disagree Somewhat/Disagree Strongly	25%	30%	21%	23%
Not Sure/Refused	2%	1%	2%	3%

Source: Kaiser/Commonwealth Health Insurance Survey 1992

IF YOU WERE OFFERED A DIFFERENT HEALTH PLAN WHICH LIMITED YOUR AND YOUR FAMILY'S CHOICE OF DOCTORS AND HOSPITALS IN RETURN FOR REAL SAVINGS IN YOUR OUT-OF-POCKET COSTS, HOW INTERESTED WOULD YOU BE IN CHANGING TO THIS PLAN?

	Total	Private Insurance	Medicaid	No Insurance
Very Interested/Somewhat Interested	55%	53%	48%	63%
Not Very Interested/Not at All Interested	43%	45%	45%	33%
Not Sure/Refused	3%	2%	7%	5%

Source: Kaiser/Commonwealth Health Insurance Survey 1992

WHICH OF THE FOLLOWING BEST DESCRIBES HOW YOU FEEL ABOUT THE COUNTRY'S HEALTH CARE SYSTEM?

	Total	Rep	Dem	Ind
Works as Well as Expected	5%	8%	3%	4%
Works Fairly Well/Minor Changes Needed	35%	40%	33%	35%
Works Badly/Major Changes Needed	38%	38%	39%	37%
Works So Badly/Different System Needed	19%	12%	22%	22%
Not Sure/Refused	3%	2%	3%	2%

Source: Kaiser/Commonwealth Health Insurance Survey 1992

OVERALL, HOW DO YOU FEEL ABOUT THE HEALTH CARE SERVICES YOU AND YOUR FAMILY HAVE USED IN THE LAST FEW YEARS?

	1987*	1990*	1992**
Very/Somewhat Satisfied	84%	79%	71%
Very/Somewhat Dissatisfied	13%	18%	26%
Not Sure/Refused	3%	3%	3%

* Source: Louis Harris Surveys 1987, 1990
** Source: Kaiser/Commonwealth Health Insurance Survey 1992

SURVEY QUESTIONS/RESPONSES

SECTION ONE: THE PUBLIC'S EXPERIENCES, FEARS AND CONCERNS

I A HISTORICALLY, AMERICANS HAVE BEEN SATISFIED WITH THEIR OWN HEALTH CARE ARRANGEMENTS, BUT THEY ARE BECOMING INCREASINGLY DISSATISFIED

Question -- Overall, how do you feel about the health care services you and your family have used in the last few years?

	1987*	1990*	1992**
Very/Somewhat satisfied	84%	79%	71%
Very/Somewhat dissatisfied	13%	18%	26%
Not sure/Refused	3%	3%	3%

*Source: Louis Harris Surveys 1987, 1990

**Source: Kaiser/Commonwealth Health Insurance Survey

I B AMERICANS RANK THEIR TOP HEALTH CARE CONCERNS AND COMPARE THEM WITH OTHER MAJOR CONCERNS

Question--I will read you a list of things that people worry about. Please say for each one if it is something you worry about a great deal, quite a lot, not much or not at all.

	A great deal/ Quite a lot
..that health insurance will become so expensive that you won't be able to afford it?	61%
..that you will have to pay very expensive medical bills not covered by health insurance?	50%
..that you will not be able to get the health care you need when you are very ill because you can't afford it?	48%
..that your benefits under your current health care plan will be cut back substantially?	48%
..that if you have large medical bills, your health plan will refuse to insure you?	39%
..that your employer's health care costs will limit your wage increases?	31%
..that your employer will stop providing you with any health insurance?	26%
Answered at least one of the above: A great deal or quite a lot	**82%**
COMPARED WITH OTHER MAJOR CONCERNS	
..that you will not be able to maintain your standard of living?	50%
..that you or your spouse will lose your job in 1992?	33%

Source: Kaiser/Commonwealth Health Insurance Survey

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A SIGNIFICANT NUMBER OF AMERICANS ARE HAVING DIFFICULTY GETTING THE CARE THEY FEEL THEY NEED

* Approximately 23 million Americans needed medical care but did not get it in the last 12 months. Approximately 18 million could not get medical care for financial reasons.

* Last year, 54 million people postponed care they thought they needed for financial reasons.

* About 7 million Americans report that they were denied health insurance because of a prior medical condition.

* Nearly 22 million Americans said they themselves, or someone else in their family, or both, had been refused health care during the last year because they didn't have insurance or couldn't pay.

Source: Kaiser/Commonwealth Health Insurance Survey

Question -- During last year have you or has any member of your family been refused health care because you didn't have insurance or you couldn't pay?

% answering yes to respondent, family or both:

		TOTAL
Overall		12%
Income:		
less than	$15,000	16%
	$15,00-$50,000	11%
over	$50,000	10%
Private insurance		11%
Medicaid		14%
Uninsured		19%

Source: Kaiser/Commonwealth Health Insurance Survey

Question -- In the last 12 months have you ever put off or postponed seeking health care which you felt you needed because you could not afford it?

% answering yes:

		TOTAL
Overall		30%
Income:		
less than	$15,000	39%
	$15,000-$50,000	31%
over	$50,000	19%
Private insurance		24%
Medicaid		26%
Uninsured		67%

Source: Kaiser/Commonwealth Health Insurance Survey

Question -- In the past 12 months was there a time when <u>you</u> needed medical care but did not get it?

% answering yes:	TOTAL
Overall	13%
Income:	
less than $15,000	20%
$15,000 - $50,000	12%
over $50,000	7%
Private insurance	8%
Medicaid	13%
Uninsured	37%
(For those answering "yes") What was the main reason?	
Cost too much/not covered	77%
Could not get appointment	2%
Didn't know clinic/doctor	1%
Not easy to get to physician's office	1%
All others	15%
Not sure	4%

Source: Kaiser/Commonwealth Health Insurance Survey

Question -- In the past 12 months was there a time when one of your children 17 years old or younger needed medical care but did not get it?

% answering yes:

	TOTAL
Overall	3%
Income:	
less than $15,000	3%
$15,000 - $50,000	4%
over $50,000	1%
Private insurance	3%
Medicaid	2%
Uninsured	7%
(For those answering "yes"): What was the main reason?	
Cost too much/not covered	79%
Could not get appointment	3%
Didn't know clinic/doctor	5%
No transportation/too far	2%
All others	8%
Not sure	5%

Source: Kaiser/Commonwealth Health Insurance Survey

I D **SUBSTANTIAL NUMBERS OF AMERICANS FEEL FINANCIALLY RESPONSIBLE FOR MEDICAL BILLS OF UNINSURED RELATIVES**

Question -- In a medical emergency would you feel financially responsible to help pay the medical bills of some family member who currently does not have health insurance?

		TOTAL
	Yes	51%
	No	47%
Of those answering yes:		
Private insurance		48%
Medicaid		55%
Uninsured		69%
Who is that person?		
Child		38%
Parent		27%
Sibling		13%
Spouse		10%
Income:		
less than	$15,000	50%
	$15,000 - $35,000	53%
	$35,000 - $50,000	54%
over	$50,000	53%

Source: Kaiser/Commonwealth Health Insurance Survey

Question -- In the last year about how much have you and your family had to pay out-of-pocket for medical bills which were not covered by insurance?

	TOTAL	Private Insurance	Medicaid	Uninsured
Nothing	22%	21%	44%	16%
$200 or less	21%	23%	13%	12%
$201 - $500	20%	21%	17%	21%
501 - $1,000	14%	15%	5%	18%
$1,000 and over	16%	14%	11%	31%

Source: Kaiser/Commonwealth Health Insurance Survey

MANY PEOPLE FACED WITH HIGH OUT-OF-POCKET COSTS EXPECTED INSURANCE TO PAY FOR THEM

Question -- Before you and your family ran up these medical bills did you know that they would not be covered by insurance, or did you expect insurance to pay much more of these costs?

For those who had out-of-pocket costs of $2000 or more:

	TOTAL	Private Insurance	Medicaid	Uninsured
Knew costs were not covered	59%	53%	45%	73%
Expected insurance to pay much more	36%	43%	55%	21%
Not sure/Refused	5%	4%	0%	5%

Source: Kaiser/Commonwealth Health Insurance Survey

I E MANY AMERICANS ARE WILLING TO TRADE CHOICE FOR LOW COSTS BUT DON'T SEE MANY LOWER COST OPTIONS

Question -- If you were offered a different health plan which limited your and your family's choice of doctors and hospitals in return for real savings in your out-of-pocket costs, how interested would you be in changing to this plan?

		INSURANCE		
	TOTAL	Private	Medicaid	None
Very interested/ Somewhat interested	55%	53%	48%	63%
Not very interested/ Not at all interested	43%	45%	45%	33%
Not sure/Refused	3%	2%	7%	5%

Source: Kaiser/Commonwealth Health Insurance Survey

Question -- Is there a health plan through which you and your family could get the health care you need which is less expensive than the way you do it now?

	TOTAL	HMO Members	Non-HMO Members
Yes	9%	7%	9%
No	78%	83%	78%
Not sure/refused	13%	10%	13%

Source: Kaiser/Commonwealth Health Insurance Survey

Question -- Have you ever taken steps to find a less expensive way of getting health care services or not?

	TOTAL	INSURANCE Private	Medicaid	None
Yes	45%	41%	18%	86%
No	54%	58%	82%	14%
Not sure/Refused	1%	1%	0	0

Source: Kaiser/Commonwealth Health Insurance Survey

SECTION II: MEASURING PROGRESS TOWARD HEALTH REFORM

II A AMERICANS WANT THE FEDERAL GOVERNMENT, NOT THE PRIVATE SECTOR OR STATE GOVERNMENT, TO PLAY THE LEAD ROLE IN HEALTH CARE REFORM

Question -- Who should have the primary role in providing health insurance to all Americans and controlling health costs?

	TOTAL	REP	DEM	IND
Government	60%	52%	69%	62%
Private sector	34%	43%	26%	35%
Not sure/Refused	6%	5%	6%	4%

Source: Kaiser/Commonwealth Health Insurance Survey*

Question -- If it's a choice between the federal government or the state governments, which do you think should take the lead in changing the health care system?

	TOTAL	REP	DEM	IND
Federal	62%	59%	64%	62%
State	30%	33%	28%	29%
Both Federal & State	3%	3%	3%	3%
Neither	1%	1%	1%	2%
Not sure/Refused	4%	3%	4%	4%

Source: Kaiser/Commonwealth Health Insurance Survey

*Party affiliation totals are based on self-identification, not actual registration

II B AMERICANS ARE INCREASINGLY HOLDING GOVERNMENT RESPONSIBLE FOR THE PROBLEMS WITH OUR HEALTH CARE SYSTEM

Question -- Looking at the problems you see with our health care system, which group or groups do you think are mainly to blame?

	TOTAL	REP	DEM	IND
Government	31%	29%	33%	33%
Doctors	25%	27%	24%	26%
Insurers	23%	25%	22%	25%
Hospitals	15%	17%	14%	16%
All others mentioned	25%	26%	24%	25%

Source: Kaiser/Commonwealth Health Insurance Survey

II C THE ECONOMY WILL BE THE DOMINANT ISSUE WHEN AMERICANS CAST THEIR VOTES IN THE PRESIDENTIAL AND CONGRESSIONAL ELECTIONS, AND HEALTH CARE WILL BE THE NUMBER TWO ISSUE ON VOTERS' MINDS IN DECIDING WHICH CANDIDATES TO SUPPORT

Question -- The next presidential election will be in November 1992. What two issues do you think will be of most importance to you in determining who you will support?

ISSUE	TOTAL	REP	DEM	IND
The economy	50%	55%	46%	51%
Health care	25%	24%	27%	24%
Taxes	11%	12%	10%	11%
Jobs	8%	6%	10%	8%
Education	7%	8%	8%	7%
Foreign policy/Aid	5%	7%	3%	6%
Abortion	4%	5%	3%	4%

(total responses exceed 100% because respondents were asked to name two issues)

Source: Kaiser/Commonwealth Health Insurance Survey

Question -- What two issues will be of most importance to you in deciding which Congressman or Senator to support?

ISSUE	TOTAL	REP	DEM	IND
The economy	34%	38%	32%	36%
Health care	19%	17%	23%	19%
Taxes	12%	16%	10%	13%
Education	11%	11%	12%	11%
Jobs	6%	5%	8%	5%

Source: Kaiser/Commonwealth Health Insurance Survey

II D BUT HEALTH CARE WILL BE LESS OF AN ISSUE IN STATE ELECTIONS

Question -- What two issues will be of most importance to you in deciding who you will support for Governor or State Representative?

ISSUE	TOTAL	REP	DEM	IND
The economy	29%	33%	27%	30%
Education	21%	24%	22%	19%
Taxes	20%	26%	15%	21%
Health care	11%	8%	14%	12%
Jobs	8%	6%	10%	9%

Source: Kaiser/Commonwealth Health Insurance Survey

II E IN THE PRESIDENTIAL ELECTION, HEALTH WILL BE MORE SALIENT TO THE AGE GROUPS WITH THE GREATEST VOTER TURNOUT

Question -- What two issues do you think will be of most importance to you in determining who you will support in the presidential election in November 1992.

% citing health as one of top two issues:

	TOTAL
	25%
Age:	
18-29	16%
30-39	22%
40-49	30%
50-64	31%
65 & over	32%

(total responses exceed 100% because respondents were asked to name two issues)

Source: Kaiser/Commonwealth Health Insurance Survey

II F AMERICANS ARE DIVIDED ON THE MAJOR OPTIONS FOR HEALTH CARE REFORM

Question -- Which of the following ways of financing health care would you favor?

OPTIONS FOR REFORM	TOTAL	REP	DEM	IND
Play-or-Pay	33%	30%	36%	33%
Single-Payor	30%	27%	33%	30%
Tax credit plan	27%	32%	21%	27%
Leave things the way they are	2%	2%	0	2%
Not sure/Refused	8%	8%	9%	8%

Source: Kaiser/Commonwealth Health Insurance Survey

(Actual questions asked) A national health plan in which businesses are required to either offer private health insurance for their employees or contribute to a government program that would cover them. Those who are unemployed or work part-time would be enrolled in the same government program, financed by taxpayers. To control costs, government would set the fees charged by doctors and hospitals. **(Play-or-Pay)**

A national health plan financed by taxpayers in which all Americans would get their insurance from a single government plan. To control costs, government would set the fees charged by doctors and hospitals. **(Single-Payor)**

A national plan which would offer low- and moderate-income uninsured Americans an income tax refund to help purchase private health insurance. Those who are not insured would have access to care through tax supported public health clinics. To control costs, financial incentives would encourage enrolling in less costly health care plans. **(Tax Credit Plan)**

II G **AT THIS POINT, MOST AMERICANS DO NOT FEEL THAT ANY PARTY OR CANDIDATE HAS A REFORM PROPOSAL THEY CAN IDENTIFY OR SUPPORT**

Question -- Do you see any real difference between the health care reform proposals of the Republicans and the Democrats, or not?

	TOTAL	REP	DEM	IND
See real difference	16%	16%	19%	15%
See no real difference	68%	69%	67%	70%
Not sure/Refused	16%	15%	14%	15%

Source: Kaiser/Commonwealth Health Insurance Survey

Question -- Can you think of any political leader or candidate whose proposals for health care reform you support?

CANDIDATE	TOTAL	REP	DEM	IND
Bush	5%	9%	1%	6%
Clinton	2%	1%	3%	1%
Tsongas	1%	1%	1%	2%
Kennedy	1%	0	1%	2%
Kerrey	1%	0	2%	1%
Buchanan	0	1%	0	1%
Brown	0	0	0	0
All others	2%	2%	2%	2%
Don't know/Refused	7%	5%	7%	7%
No one	80%	80%	82%	77%

Source: Kaiser/Commonwealth Health Insurance Survey

II H AMERICANS STRONGLY SUPPORT DIRECT GOVERNMENT INTERVENTION TO CONTROL HEALTH CARE COSTS

Question -- Should the government set the rates that insurers can charge for health premiums?

	TOTAL	REP	DEM	IND
Agree strongly/ Agree somewhat	75%	74%	78%	75%
Disagree somewhat/ Disagree strongly	22%	25%	20%	23%
Not sure/Refused	3%	2%	2%	2%

Source: Kaiser/Commonwealth Health Insurance Survey

Question -- Should the government set the rates that doctors and hospitals charge patients?

	TOTAL	REP	DEM	IND
Agree strongly/ Agree somewhat	71%	69%	74%	74%
Disagree somewhat/ Disagree strongly	27%	30%	25%	25%
Not sure/Refused	2%	1%	2%	2%

Source: Kaiser/Commonwealth Health Insurance Survey

Question -- Should the government set the prices for prescription drugs?

	TOTAL	REP	DEM	IND
Agree strongly/ Agree somewhat	73%	69%	77%	74%
Disagree somewhat/ Disagree strongly	25%	30%	21%	23%
Not sure/Refused	2%	1%	2%	3%

Source: Kaiser/Commonwealth Health Insurance Survey

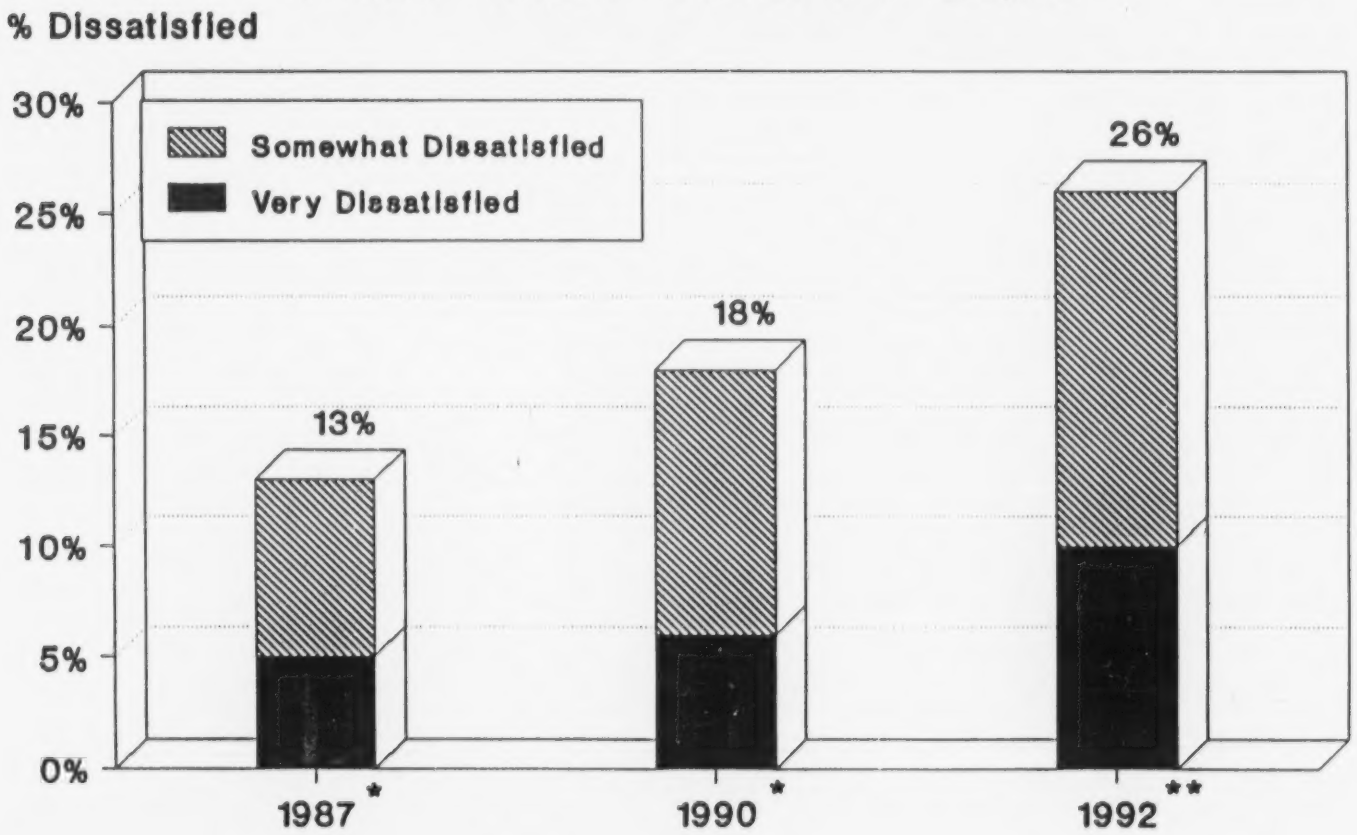
II I THE PUBLIC APPEARS TO WANT SUBSTANTIAL CHANGE ... BUT NOT A COMPLETE OVERHAUL OF THE SYSTEM

Question -- Which of the following best describes how you feel about the country's health care system?

	TOTAL	REP	DEM	IND
Works as well as expected	5%	8%	3%	4%
Works fairly well/ Minor changes needed	35%	40%	33%	35%
Works badly/ Major changes needed	38%	38%	39%	37%
Works so badly/ Different system needed	19%	12%	22%	22%
Not sure/Refused	3%	2%	3%	2%

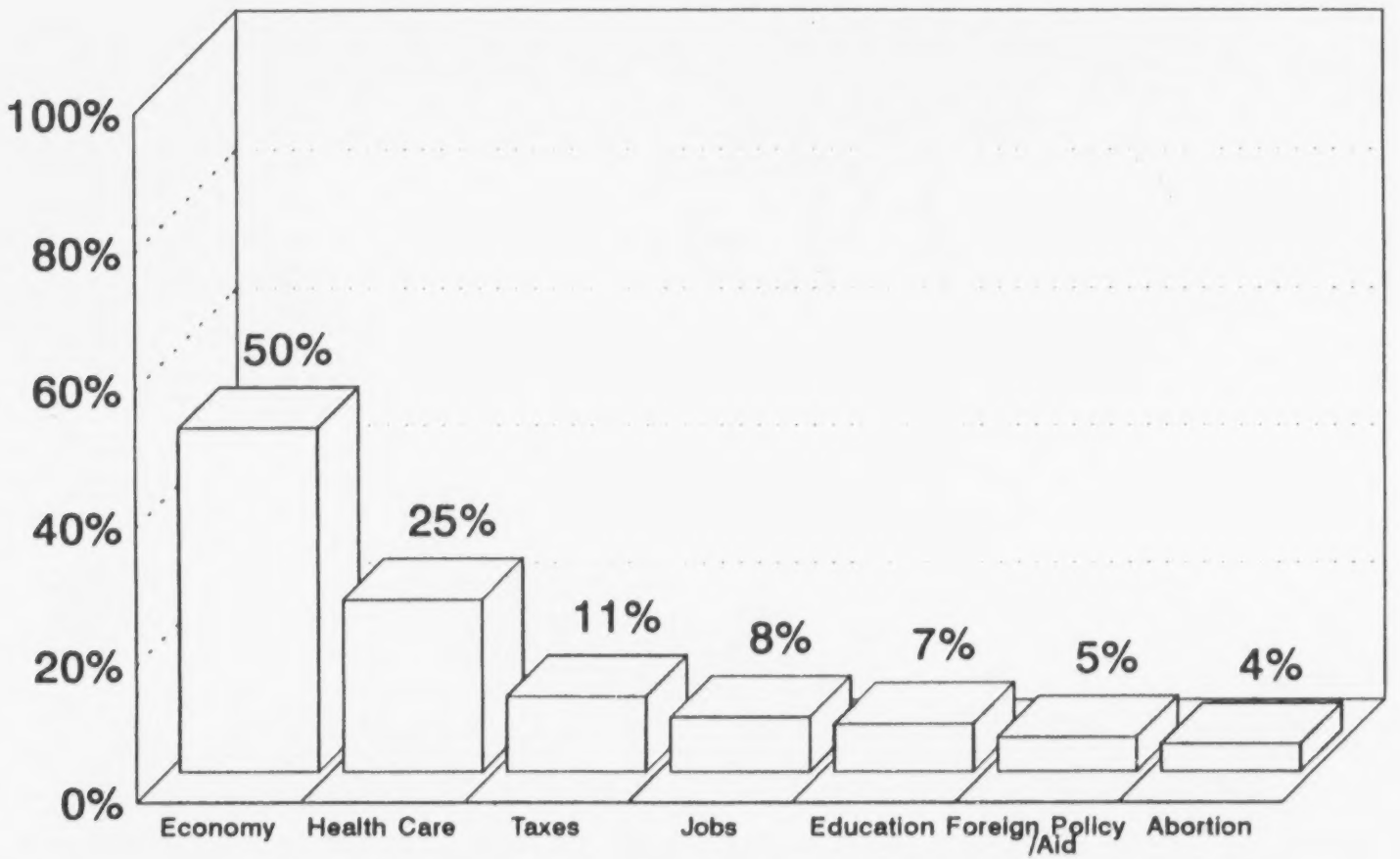
Source: Kaiser/Commonwealth Health Insurance Survey

Americans are increasingly dissatisfied with their health care



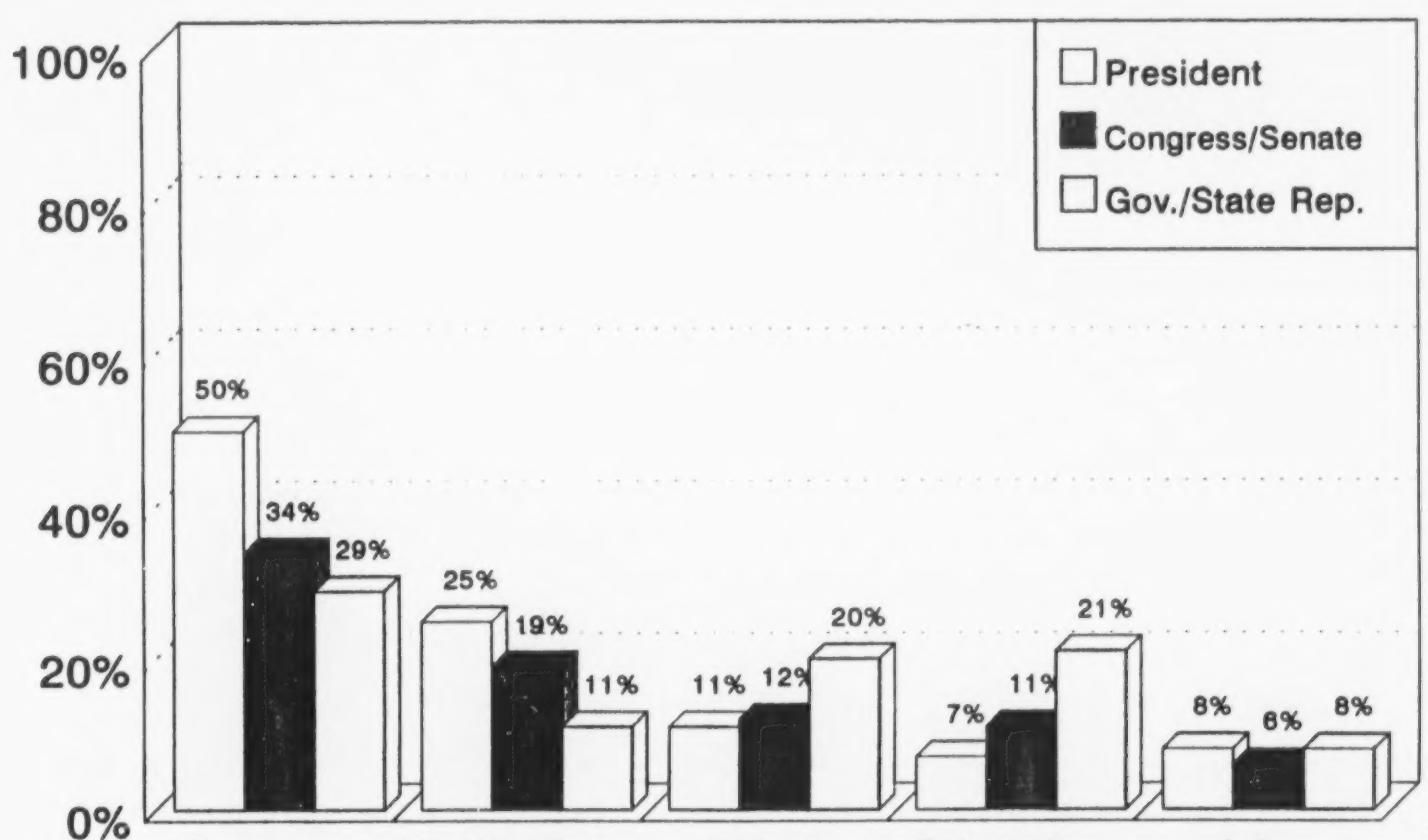
* 1987, 1990 Harris Surveys
** 1992 Kaiser/Commonwealth Health Insurance Survey

The next presidential election will be in 1992. What two issues do you think will be of most importance to you in determining who you will support?



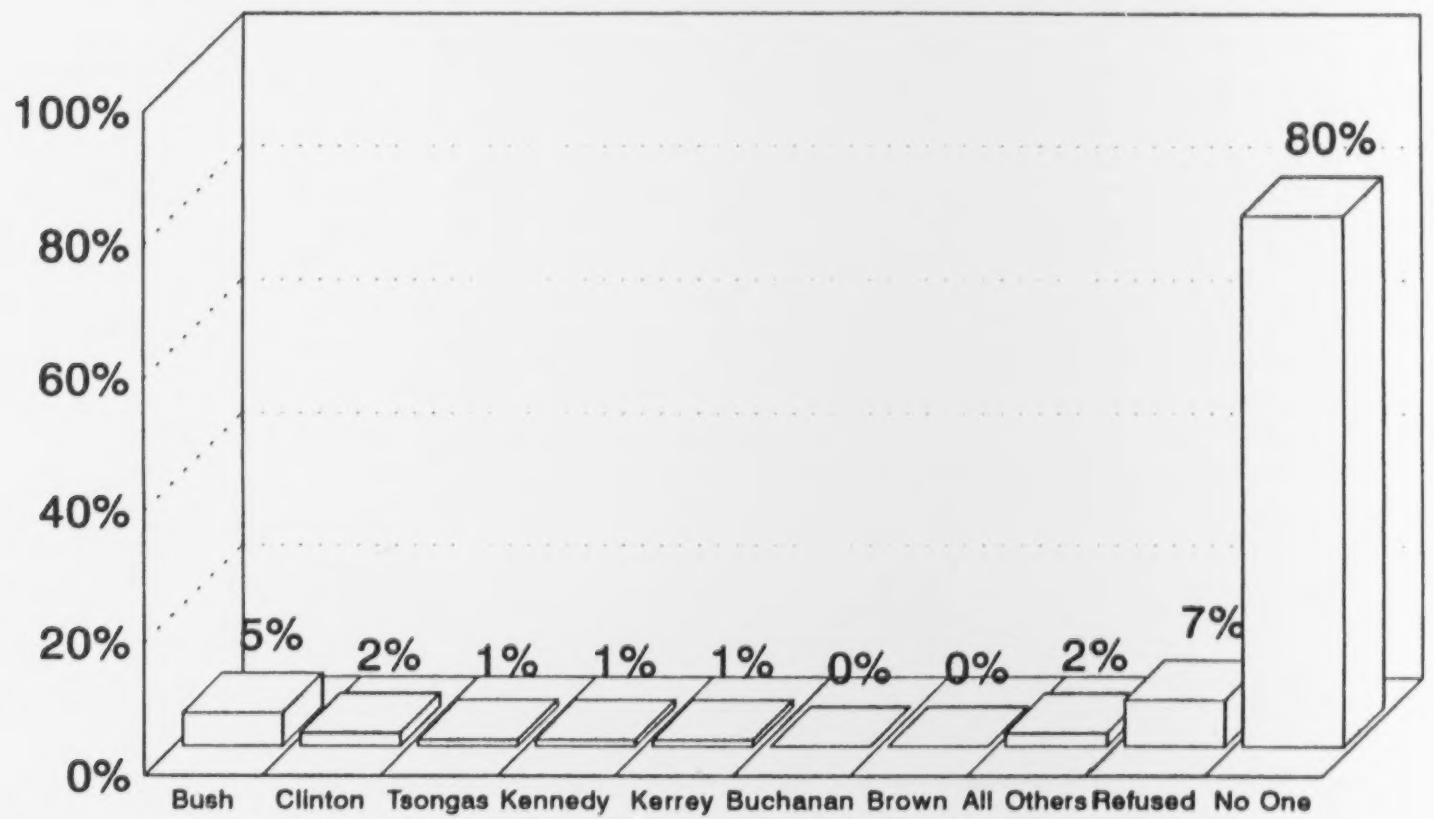
Source: Kaiser/Commonwealth Health Insurance Survey 1992
(total responses exceed 100% because respondents were asked to name two issues)

What two issues will be of most importance to you in deciding who you will support for President, Congress/Senate and Governor/State Representative?



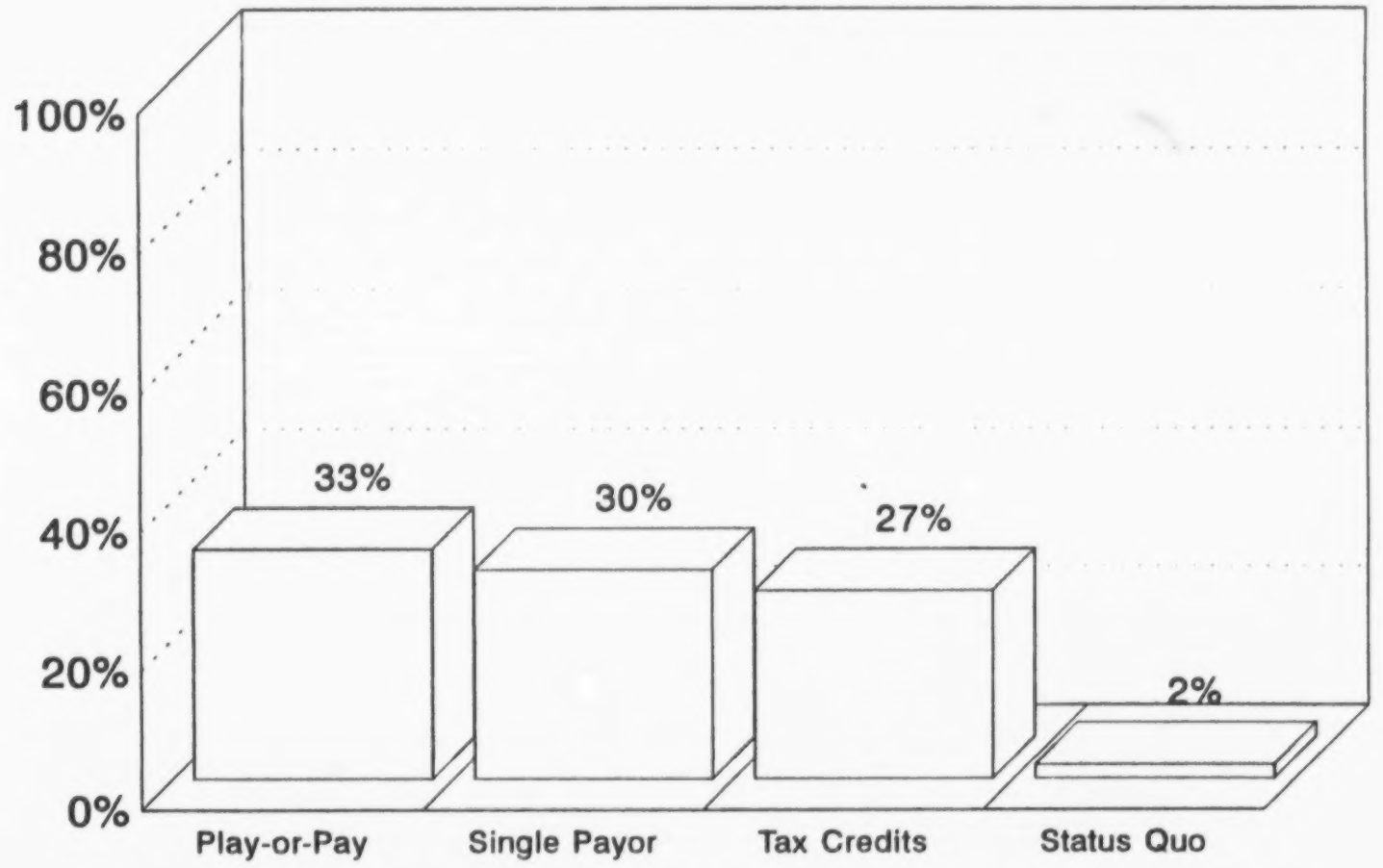
Source: Kaiser/Commonwealth Health Insurance Survey 1992
(total responses may exceed 100% because respondents were asked to name two issues)

Can you think of any political leader or candidate whose proposals for health care reform you support?



Source: Kaiser/Commonwealth Health Insurance Survey 1992

Which of the following ways of financing health care would you favor?



Source: Kaiser/Commonwealth Health Insurance Survey 1992

SURVEY INSTRUMENT

LOUIS HARRIS AND ASSOCIATES, INC.
630 Fifth Avenue
New York, New York 10111

/ FOR OFFICE USE ONLY:
/
/ Questionnaire No.:_____
/
/_____1-5

Study No. 912063 (General Public) Americans And Their Health Insurance
(8-13)
January 31, 1992

Sample Point No./ / / / / / / / /
4*24-25-26-27-28-29-30

Time Started:_____A.M./P.M.

Interviewer:_____ Date:_____

Area Code:_____ Telephone No.:_____4*(09-18)

Hello, I'm _____ from the Harris Poll the national survey research firm in New York. We are conducting a survey about important issues facing the country. We want to know what you think about them. (IF NECESSARY: Your answers and those of everyone we interview are completely confidential and will only be used for statistical analysis). We want to speak with an adult in this household.

A. How many adults 18 years of age or older live in this household?

/ / / (IF "0", SCREEN OUT Q.A AND SKIP TO Q.F4)
1*(15-16) (IF "1", SKIP TO Q.SEX)

B. How many of these are women?

/ / /
(17-18)

C. INTERVIEWER: SUBTRACT NUMBER OF WOMEN FROM TOTAL NUMBER OF ADULTS. RECORD NUMBER OF MEN.

/ / /
(19-20)

IF "0" IN Q.B OR Q.C, READ INSTRUCTION "D"; SKIP OTHERS TO "E"

D. ADULTS IN HOUSEHOLD ARE SAME SEX: USE RESPONDENT SELECTION GRID ON BACK OF SAMPLE CARD. IF RESPONDENT IS NOT AVAILABLE, ARRANGE CALLBACK.

"Let me see, in this household I need to speak with the _____."

E. FEMALE(S) MALE(S) IN HOUSEHOLD: USE SEX INDICATED ON FRONT OF SAMPLE CARD AND RESPONDENT SELECTION GRID ON BACK OF CARD TO DETERMINE WHO YOU SHOULD SPEAK TO. IF RESPONDENT NOT AVAILABLE, ARRANGE CALLBACK.

"Let me see, in this household I need to speak with the _____."

FROM OBSERVATION: Respondent Sex

Male.....(21(____-1
Female.....____-2

SECTIONS

A. Political Salience Of Health Care
B. Health Status
C. Salience Of Different Health Care Issues
D. Access
E. Insurance Coverage
G. Employment Insurance Experience And Behavior
H. Managed Care
I. Cost Experiences
J. Worries
K. Reform Options
F. Factuals/Demographics

A. Political Salience Of Health Care Reform

A1. The next Presidential election will be in November 1992. What two issues do you think will be of most importance to you in determining who you will support? (DO NOT READ LIST)

Defense.....(22(____-1
Foreign policy/aid.....____-2
The economy.....____-3
Health care.....____-4
Crime.....____-5
Drugs.....____-6
Education.....____-7
Programs for the poor.....____-8
Programs for the elderly.....____-9
Taxes.....(23(____-0
Peace/world peace/nuclear arms.....____-1
Federal deficit/budget.....____-2
Human/civil/women's rights.....____-3
Domestic/social issues.....____-4
Other (SPECIFY):

_____..____-5

_____(24-25)
Not sure.....(23(____-6

A2. Also in November, 1992 there will be elections for Congressmen and Senators. What two issues do you think will be of most importance to you in deciding which Congressman or Senator to support? (DO NOT READ LIST)

Defense.....(26(____-1
Foreign policy/aid.....____-2
The economy.....____-3
Health care.....____-4
Crime.....____-5
Drugs.....____-6
Education.....____-7
Programs for the poor.....____-8
Programs for the elderly.....____-9
Taxes.....(27(____-0
Peace/world peace/nuclear arms.....____-1
Federal deficit/budget.....____-2
Human/civil/women's rights.....____-3
Domestic/social issues.....____-4
Other (SPECIFY):

_____..____-5

_____(28-29)
Not sure.....(27(____-6

A3. And the next time you have to vote for a <u>state election</u> such as for governor or state representative what do you think are the <u>two most important issues</u> which will influence the way you will vote? (DO NOT READ LIST)

Defense.....(30(____-1
Foreign policy/aid.....____-2
The economy.....____-3
Health care.....____-4
Crime.....____-5
Drugs.....____-6
Education.....____-7
Programs for the poor.....____-8
Programs for the elderly.....____-9
Taxes.....(31(____-0
Peace/world peace/nuclear arms.....____-1
State deficit/budget.....____-2
Human/civil/women's rights.....____-3
Domestic/social issues.....____-4
Other (SPECIFY):

_____..____-5

_____(32-33)
Not sure.....(31(____-6

A4. How important will each of the following issues be to you in deciding how to vote in the federal elections next November for President, Senator or Congressmen — (READ EACH ITEM) very important, somewhat important, not important?

		Very Important	Somewhat Important	Not Important	Not Sure
( ) a.	Inflation.....(34	____-1	____-2	____-3	____-4
( ) b.	Unemployment.....(35	____-1	____-2	____-3	____-4
( ) c.	Education.....(36	____-1	____-2	____-3	____-4
( ) d.	Crime.....(37	____-1	____-2	____-3	____-4
( ) e.	Environment.....(38	____-1	____-2	____-3	____-4
( ) f.	Abortion.....(39	____-1	____-2	____-3	____-4
( ) g.	Health care.....(40	____-1	____-2	____-3	____-4
( ) h.	The personality, character and record of the candidates.....(41	____-1	____-2	____-3	____-4
( ) i.	Taxes.....(42	____-1	____-2	____-3	____-4
( ) j.	Foreign affairs.....(43	____-1	____-2	____-3	____-4

B. Health Status

B1. Would you say your health, in general, is excellent, good, fair or poor?

Excellent.....(44(____-1
Good.....____-2
Fair.....____-3
Poor.....____-4
Not sure.....____-5

B2. Does a disability, handicap, or chronic disease keep you from participating fully in work, school, housework, or other activities, or not?

Yes, keeps me from participating....(45(____-1
No, does not.....____-2
Not sure.....____-3

B3. Have you, or any member of your household, had a serious illness in the last 12 months, or not?

Yes, had a serious illness.....(46(____-1
Not had a serious illness.....____-2
Not sure.....____-3

B4. Has any other family member, not living in your household, had a serious illness in the last 12 months, or not?

Yes, other family member has had serious illness.....(47(____-1
No, not had serious illness.....____-2
Not sure.....____-3

C. Salience of Different Health Care Issues

C1. Overall, how do you feel about the health care services that you and your family have used in the last few years? Would you say you are very satisfied, somewhat satisfied, somewhat dissatisfied, or very dissatisfied?

Very satisfied.....(48(____-1
Somewhat satisfied.....____-2
Somewhat dissatisfied.....____-3
Very dissatisfied.....____-4
Not sure.....____-5

C2. Which of the following best describes how you feel about the country's health care system? READ LIST

1. It works as well as can be expected.....(49(____-1

-OR-

2. It works fairly well; but minor changes are needed.....____-2

-OR-

3. It works badly and major changes are needed.....____-3

-OR-

4. It works so badly that an entirely different system is needed.....____-4

Not sure.....____-5

C3. Looking at the problems you see with our health care system, which group or groups do you think are mainly to blame? (MULTIPLE RECORD — DO NOT READ LIST)

Doctors.....(50(____-1
Hospitals.....____-2
Patients/consumers.....____-3
Government.....____-4
Insurers.....____-5
Employers.....____-6
Unions.....____-7
Other (SPECIFY):

_____..____-8

_____(51-52)
Not sure.....(50(____-9

C4. Do you see any real difference between the health care reform proposals of the Republicans and the Democrats, or not?

See real difference.....(53(____-1 (ASK Q.C5)

Do not see real difference.....____-2
Not sure.....____-3 (SKIP TO Q.C6)

C5. What do you think is the main difference between the Republican and the Democratic health care reform proposals? (PROBE FOR ONE CLEAR RESPONSE)

_____(54-55)

ASK EVERYONE

C6. Can you think of any political leader or candidate whose proposals for health care reform you support?

Yes (Specify)..... (56(____-1

_____(57-58 (ASK Q.C7)

No, none.....(56(____-2
Not sure.....____-3 (SKIP TO Q.C8)

C7. What do you like about (his/her) proposals? (PROBE FOR SPECIFICS AND TO THE NEGATIVE)

_____(59-60)

C8. If it's a choice between the Federal government or the State governments, which do you think should take the lead in changing the health care system? SINGLE RECORD

Federal.....(61(____-1
State.....____-2
Both (vol.).....____-3
Neither (vol.).....____-4
Not sure.....____-5

D. Access

D1. In the past 12 months, was there a time when you needed medical care but did not get it, or not?

Yes, needed and did not get...(62(____-1 (ASK Q.D2)

No such occasion.....____-2
Not sure.....____-3 (SKIP TO Q.D3)

D2. What was the main reason that you did not get the medical help needed in this situation? DO NOT READ LIST — SINGLE RECORD

Could not get an appointment.....(63(____-1
Don't know good doctor/clinic to go to.....____-2

It cost too much.....____-3
Could not get off work.....____-4

Has no one to take care of children.....____-5
Wait too long in Dr.'s office/clinic.....____-6

Not easy to get to the Dr.'s office/clinic.....____-7
Couldn't find a doctor who speaks my language.....____-8

Not covered by insurance.....____-9
Too nervous or afraid.....(64(____-0
No transportation/too far.....____-1
Language problem.....____-2
Paperwork/bureaucracy.....____-3

Other (SPECIFY):

_____...____-4

_____(65-66)

Not sure.....(64(____-5
Refused.....____-6

ASK EVERYONE

D3. During the past 12 months was there a time when one of your children 17 years old or younger needed medical care but did not get it, or not?

Yes, child needed and did not get.(67(____-1 (ASK Q.D4)

No such occasion/no such child.....____-2
Not sure.....____-3 (SKIP TO Q.D5)

D4. What was the main reason your child did not get the medical help needed? DO NOT READ LIST — SINGLE RECORD

1. Could not get an appointment.....(68(____-1
2. Didn't know good Dr./clinic to go to.....____-2
3. It cost too much.....____-3
4. Could not get off work.....____-4
5. Had no one to take care of children.....____-5
6. Wait too long in Dr. office/clinic.....____-6
7. Not easy to get to the Dr. office/clinic.....____-7
8. Couldn't find a Dr. who speaks my language.....____-8
9. Not covered by insurance.....____-9
10. Too nervous or afraid.....(69(____-0
11. No transportation/too far.....____-1
12. Language problem.....____-2
13. Paperwork/bureaucracy.....____-3
14. Other (SPECIFY):

_____...____-4

_____(70-71)

Not sure.....(69(____-5

ASK EVERYONE

D5. During the last year — since (DATE ONE YEAR AGO) — have you or has any member of your family been refused health care because you didn't have insurance or you couldn't pay? (IF YES:) Was that you, or some other family member? SINGLE RECORD

Yes, respondent was refused.....(72(____-1
Yes, someone else in family.....____-2
Yes, both respondent and someone else (vol.).____-3
No, not refused.....____-4
Not sure.....____-5

D6. In the past twelve months, have you ever put off or postponed seeking health care which you felt you needed because you could not afford it, or not?

Yes, put off or postponed getting health care...(73(____-1
No, did not put off or postpone.....____-2
Not sure.....____-3

D7. In the past twelve months, have you ever put off or postponed seeking health care which you felt your child aged 17 or less needed because you could not afford it, or not?

Yes, put off or postponed getting health care...(74(____-1
No, did not put off or postpone/no such child.....____-2
Not sure.....____-3

E. Insurance Coverage

E1. Now a question about different kinds of health plans or health insurance, including those provided by the government. As I read each of the following health plans, please tell me whether or not you yourself are covered by it? (READ LIST)

ROTATE — START AT "X"	Yes, Covered	No, Not Covered	Not Sure	Refused
( ) 1. Health insurance through your work or union..	(75(____-1	____-2	____-3	____-4
( ) 2. Health insurance through someone else's work or union.....	(76(____-1	____-2	____-3	____-4
( ) 3. Health insurance bought directly by yourself or your family.....	(77(____-1	____-2	____-3	____-4
( ) 4. Medicare, a government plan that pays health care bills for people aged 65 and over and for some disabled people.....	(78(____-1	____-2	____-3	____-4
( ) 5. Medicaid, or Public Aid.....	(79(____-1	____-2	____-3	____-4
READ LAST 6. Health insurance through some other group....	(80(____-1	____-2	____-3	____-4

IF ANY "X" IN BOX (Q.E1) ASK Q.E2a. (THOSE WITH NO "X" IN BOX SKIP TO Q.E3)

E2a. Was there any time in the past two years when you were completely without any health plan or medical insurance coverage?

Yes, was such a time.....2*(08(____-1 (ASK Q.E2b)

No, no such time.....____-2
Not sure.....____-3 (SKIP TO Q.E4)

E2b. Why were you without insurance? (DO NOT READ LIST) (SINGLE RECORD)

Lost job/between jobs/unemployed.....(09(____-1
Insurance didn't cover dependents.....____-2
Job didn't offer coverage.....____-3
Couldn't obtain/was refused insurance
because of poor health, illness, or age.____-4
Too expensive, can't afford.....____-5
Don't believe in insurance.....____-6
In good health/don't need it.....____-7
Changed insurance company.....____-8
Don't know how to get insurance.....____-9
Never thought about it.....(10(____-0
Other reason (SPECIFY)

_____.____-1

_____(11-12)
Not sure.....(10(____-2
Refused.....____-3

E2c. About how many weeks were you without any health insurance over the last two years?

Weeks.....(13(____-1 } (GO TO Q.E2c1)
Months.....____-2 } (GO TO Q.E2c2)
Not sure.....____-3 } (GO TO Q.E4)

E2c1. /____/____/ Weeks OR E2c2. /____/____/ Months
(14-15) (16-17) (SKIP TO Q.E4)

Not sure....(14(____-y Not sure....(16(____-y

ASK Q.E3a IF NO INSURANCE IN Q.E1

E3a. About how many weeks is it since you last had health insurance?

Weeks.....(18(___-1 } (ASK Q.E3a1)
Months.....___-2 } (ASK Q.E3a2)

Never had insurance.....___-3 } (SKIP TO Q.E3c)
Not sure.....___-4

E3a1. /___/___/ Weeks (19-20) OR E3a2. /___/___/ Months (21-22) } (ASK Q.E3b)

Not sure....(19(___-y Not sure....(21(___-y

E3b. How did you come to lose your health insurance? (PROBE FOR AN EVENT) DO NOT READ LIST

Lost job/between jobs/unemployed....3*(30(___-1
Insurance didn't cover dependents.....___-2
Job doesn't offer coverage.....___-3
Couldn't obtain/was refused insurance
because of poor health, illness, or age.___-4
Divorced.....___-5
Job eliminated benefits.....___-6
Other reason (SPECIFY):

_____.___-7

_____(31-32)
Not sure.....___-8

E3c. Why don't you have health insurance now? DO NOT READ LIST — SINGLE RECORD (PROBE FOR REASON)

Lost job/between jobs/unemployed....2*(23(___-1
Insurance doesn't cover dependents.....___-2
Job doesn't offer coverage.....___-3
Can't obtain/was refused insurance
because of poor health, illness, or age.___-4
Too expensive, can't afford.....___-5
Don't believe in insurance.....___-6
In good health/don't need it.....___-7
Changed insurance company.....___-8
Don't know how to get insurance.....___-9
Never thought about it.....(24(___-0
Other reason (SPECIFY)

_____.___-1

_____(25-26)
Not sure.....(24(___-2

ASK EVERYONE

E4. In a medical emergency would you feel financially responsible to help pay the medical bills of some family member who currently does not have health insurance, or not?

Yes, is person I would feel responsible for.....(27(____-1 (ASK Q.E5)

No such person.....____-2
Not sure.....____-3 (SKIP TO Q.E6)

E5. Who is that? MULTIPLE RECORD IF NECESSARY

Spouse.....(28(____-1
Parent.....____-2
Parent-in-law.....____-3
Child.....____-4
Someone else (SPECFIY)

_____..____-5

_____(29-30)
Not sure.....(28(____-6

ASK EVERYONE

E6. Is there a health plan through which you and your family could get the health care you need which is less expensive than the way you do it now?

Yes, there is a less expensive plan.....(31(____-1 (ASK Q.E7)

No, no such plan.....____-2
Not sure.....____-3 (SKIP TO Q.E8)

E7. Have you ever taken steps to find a less expensive way of getting health care services or not?

Yes, have taken steps.....(32(____-1
Have not.....____-2
Not sure.....____-3

E8. If you were offered a different health plan which limited your and your family's choice of doctors and hospitals in return for real savings in your out-of-pocket costs, how interested would you be in changing to this plan — very interested, somewhat interested, not very interested, or not at all interested?

Very interested.....(33(____-1
Somewhat interested.....____-2
Not very interested.....____-3
Not at all interested.....____-4
Not sure.....____-5

G. Employment Insurance Experiences And Behavior

ASK EVERYONE

G1. Are you currently working full-time, working part-time or are you retired or unemployed or a student?

Full-time.....(34(____-1} (ASK Q.G2)

Part-time.....____-2} (ASK Q.G2)

Retired.....____-3} (SKIP TO Q.H1)

Unemployed.....____-4} (ASK Q.G2)

Student.....____-5} (SKIP TO Q.H1)

Not sure.....____-6} (SKIP TO Q.H1)

G2. In the last two years, have you tried to improve your health insurance coverage by changing jobs, or not?

Yes, have/has.....(35(____-1
No, haven't/hasn't.....____-2
Not sure.....____-3

G3. And in the last two years, has there been a time when you decided not to take a better job mainly because the health insurance benefits or coverage would not be adequate, or not?

Yes, have/has.....(36(____-1
No, haven't/hasn't.....____-2
Not sure.....____-3

G4. In the last two years, has there been a time when an employer encouraged you or any member of your family to leave a job because your health care costs were considered too high, or not?

Yes, encouraged.....(37(____-1
No, did not.....____-2
No insurance in last 2 years.____-3
Not sure.....____-4

G5. Has there been any time over the last two years when a health care condition which required, or might require, expensive treatment made it impossible for you to find a job, or not?

Yes, a time.....(38(____-1
No, not a time.....____-2
Not sure.....____-3

G6. In the last two years, have you been denied a health insurance policy, or been issued a limited health insurance policy, because you had a medical condition the insurance company did not want to cover?

Yes, been denied.....(39(____-1 (SKIP TO Q.H1)

No, not been denied.....____-2
Not sure.....____-3 (ASK Q.G7)

G7. In the last two years has any member of your family who used to be insured by your health plan been dropped by your plan, or not?

Yes, family member dropped.....(40(____-1
No family member dropped/don't have family....____-2
No health insurance in last 2 years (vol.)....____-3
Not sure.....____-4

H. Managed Care

H1. People who join health maintenance organizations, or HMOs, pay a monthly fee in advance for nearly all their health and medical care, instead of the doctor billing them or their insurance company each time they use the doctor or hospital. In an HMO, you obtain your health care only from a group of medical doctors who work with the plan and only use the hospitals when they refer you. Are you a member of an HMO or not?

Yes.....(41(____-1

No.....____-2
Not sure.....____-3

I. Cost Experiences

I1. In the last year, about how much have you and your family had to pay out of pocket for medical bills which were not covered by insurance?

$/___/___/,/___/___/___/
(42-46)

Not sure.....(42(___-y

ASK Q.I2 IF COSTS $2,000 OR MORE IN Q.I1. OTHERS SKIP TO Q.I7.

I2. Before you and your family ran up these medical bills, did you know that they would not be covered by insurance, or did you expect insurance to pay much more of these costs?

Knew not covered.....(47(___-1
Expected insurance to pay much more.___-2
Not sure.....___-3
Refused.....___-4

I3. Were these costs a result of an accident, a long-term chronic illness, an acute illness, cosmetic surgery, or what? MULTIPLE RECORD IF NECESSARY

An accident.....(48(____-1
Long-term chronic illness.....____-2
An acute illness.....____-3
Cosmetic surgery.....____-4
Other (SPECIFY)

_____...____-5

_____(49-50)
Not sure.....(48(____-6

I4. How much of a financial problem have these costs been for you — very serious, somewhat serious, not very serious, not at all serious?

Very serious.....(51(____-1 (ASK Q.I5a)
Somewhat serious.....____-2

Not very serious.....____-3
Not at all serious.....____-4 (SKIP TO Q.I6)
Not sure.....____-5

I5a. Have you or your family had to change your way of life significantly to pay for your medical and health insurance bills, or not?

Yes, have.....(52(____-1 (ASK Q.I5b)

No, have not.....____-2
Not sure.....____-3 (SKIP TO Q.I6)

Q.I5b. What changes have you made? What others? (PROBE FOR SPECIFICS AND TO THE NEGATIVE)

_____(53-54)

I6. Where has most of the money come from for paying your medical bills in the last year -- from your income, out of savings, from debt that you have incurred, from other family members, or what? MULTIPLE RECORD IF NECESSARY

From your income.....(55(____-1
Out of savings.....____-2
Debt incurred.....____-3
Family members.....____-4
Other (SPECIFY)

_____.____-5

_____(56-57)
Not sure.....(55(____-6

IF NO INSURANCE IN Q.E1 SKIP TO Q.J1 — ALL OTHERS ASK Q.I7.

I7. Comparing your health plan today with your health plan one year ago, has the amount you pay — through contributions to premiums, deductibles, or co-payments — increased a lot, increased a little, decreased a little or decreased a lot?

Increased a lot	(58(	-1
Increased a little		-2
Decreased a little		-3
Decreased a lot		-4
Not changed (vol.)		-5
No health plan one year ago (vol.)		-6
Not sure		-7

J. Worries

ASK EVERYONE

J1. I will read you a list of things that people sometimes worry about. Please say for each one if it is something you worry about a great deal, quite a lot, not much or not at all? (READ LIST)

ROTATE -- START WITH "X"	A Great Deal	Quite A Lot	Not Much	Not At All	Not Applicable/ No Insurance (Vol.)	Not Sure
( ) a. That you or your spouse will lose your job in 1992.....(59(	____-1	____-2	____-3	____-4	____-5	____-6
( ) b. You will have to pay very expensive medical bills which are not covered by health insurance.....(60(	____-1	____-2	____-3	____-4	____-5	____-6
( ) c. You will lose your health insurance coverage because you or your spouse lose your job.....(61(	____-1	____-2	____-3	____-4	____-5	____-6
( ) d. You will not be able to maintain your standard of living.....(62(	____-1	____-2	____-3	____-4	____-5	____-6
( ) e. If you have large medical bills your health plan will refuse to insure you.....(63(	____-1	____-2	____-3	____-4	____-5	____-6
( ) f. That you will not be able to get the health care that you need when you are very ill because you can't afford it.....(64(	____-1	____-2	____-3	____-4	____-5	____-6
( ) g. Health insurance will become so expensive you won't be able to afford it.....(65(	____-1	____-2	____-3	____-4	____-5	____-6
( ) h. Your benefits under your current health care plan will be cut back substantially.....(66(	____-1	____-2	____-3	____-4	____-5	____-6
( ) i. Your health plan will cut the insurance you have now for your spouse or for a child.....(67(	____-1	____-2	____-3	____-4	____-5	____-6
( ) j. Your employer will stop providing you with any health insurance....(68(	____-1	____-2	____-3	____-4	____-5	____-6
( ) k. That your employer's health care costs for their employees will limit your wage increases.....(69(	____-1	____-2	____-3	____-4	____-5	____-6

K. Reform Option

K1. Which of the following ways of financing health care would you favor? (READ STATEMENTS, ROTATE):

1. A national health plan financed by tax payers in which all Americans would get their insurance from a single government plan. To control costs, government would set fees charged by doctors and hospitals..(33(____-1

OR

2. A national health plan in which businesses are required either offer private health insurance for their employees or contribute to a government program that would cover them. Those who are unemployed or work part-time would be enrolled in the same government program, financed by tax payers. To control costs, government would set fees charged by doctors and hospitals.....____-2

OR

3. A national plan which would offer low- and moderate-income uninsured Americans an income tax refund to help purchase private health insurance. Those who are not insured would have access to care through tax supported public health clinics. To control costs, financial incentives would encourage enrolling in less costly health care plans.....____-3

Leaving things the way they are (vol.).....____-4

Not sure.....____-5

K2. Would you favor mandatory health insurance coverage by small business, even if it meant some jobs might be lost?

Yes, favor mandatory insurance.....(34(____-1
No, don't favor mandatory insurance....____-2
Not sure.....____-3

K3. Please say for each of the following statements if you agree strongly, agree somewhat, disagree somewhat, or disagree strongly. The government should (READ EACH ITEM)?

ROTATE — START AT "X"	Agree Strongly	Agree Somewhat	Disagree Somewhat	Disagree Strongly	Not Sure
( ) 1. Set the rates that insurers can charge for health premiums.....(35(	____-1	____-2	____-3	____-4	____-5
( ) 2. Set the rates that doctors and hospitals charge patients.....(36(	____-1	____-2	____-3	____-4	____-5
( ) 3. Set the prices for prescription drugs.(37(	____-1	____-2	____-3	____-4	____-5

K4. Who do you believe should have the primary roll in providing health insurance to all Americans and controlling health costs — the government or the private sector?

Government.....3*(38(____-1
Private sector.....____-2
Not sure.....____-3

F. Factuals/Demographics

F1a. Are you single, married, widowed, separated, or divorced?

Single.....2*(70(____-1 (SKIP TO Q.F4)

Married.....____-2 (ASK Q.F2)

Widowed.....____-3
Separated.....____-4
Divorced.....____-5 (SKIP TO INSTRUCTIONS ABOVE Q.F3)
Not sure.....____-6

IF MARRIED.
F2. Does your spouse currently work full-time, work part-time or is he/she retired or unemployed or a student?

Full-time.....(71(____-1
Part-time.....____-2
Retired.....____-3
Unemployed.....____-4
Student.....____-5
Not sure.....____-6

ASK Q.F3 IF NEITHER RESPONDENT NOR RESPONDENT'S SPOUSE ARE WORKING. (Q.G1 OR Q.F2)
F3. Is there someone else in the household who is working full-time or part-time or not?

Yes, someone else working full-time.....(72(____-1
Someone else working part-time.....____-2
No one works.....____-3
Not sure.....____-4

ASK EVERYONE
F4. When you filed your 1990 tax return, did you take a deduction because of out-of-pocket medical expenses, or not?

Took a tax deduction.....(73(____-1
Did not take a tax deduction.....____-2
Can't remember/not sure.....____-3

F5. Did you vote in the 1988 presidential election when just over half the voters came out to vote, or didn't you get around to voting then?

Voted.....(74(____-1
Did not vote.....____-2
Not sure.....____-3

F6. Did you vote in the election for Congress in 1990, or didn't you get around to voting then?

Voted.....(75(____-1
Did not vote.....____-2
Not sure.....____-3

F7. How old are you? IF HESITANT, READ LIST

18 to 20.....(76(____-1
21 to 24.....____-2
25 to 29.....____-3
30 to 34.....____-4
35 to 39.....____-5
40 to 44.....____-6
45 to 49.....____-7
50 to 64.....____-8
65 to 74.....____-9
75 and over.....(77(____-0
Not sure.....____-1

F8. What is the last grade or level of school or college you have completed?

Less than high school (grades 1-11).....(78(____-1
High school graduate (grade 12).....____-2
Some college (13-15).....____-3
College graduate (grade 16).....____-4
Post graduate (grade 17 and over).....____-5
Not sure.....____-6

F9. In the last five years has anyone close to you, such as a parent, spouse, brother or sister, passed away, or not?

Yes, someone close died.....(79(____-1
No, someone close did not die.....____-2
Not sure.....____-3

F10. How would you describe your own personal political philosophy — conservative, moderate, or liberal?

Conservative.....(80(____-1
Moderate.....____-2
Liberal.....____-3
It varies/depends (vol.)____-4
None/not sure.....____-5
Refused.....____-6

F11. Regardless of how you might vote, what do you usually consider yourself — a Republican, a Democrat, an Independent, or what?

Republican.....3*(08(____-1
Democrat.....____-2
Independent.....____-3
None/Other (vol.).....____-4
Not sure.....____-5

F12. Which of the following income categories best describes your total 1991 household income? Was it (READ LIST)?

$7,500 or less....(09(____-1
$7,501 to $15,000.....____-2
$15,001 to $25,000....____-3
$25,001 to $35,000....____-4
$35,001 to $50,000....____-5
$50,001 to $75,000....____-6
$75,001-$100,000.....____-7
$100,001 or over.....____-8
Not sure.....____-9

INTERVIEWER: TOTAL HOUSEHOLD INCOME BEFORE TAXES FROM ALL SOURCES — IF UNSURE OF 1991 INCOME, PROBE FOR ESTIMATE

F13. Are you of Hispanic origin or descent, or not?

Yes, of Hispanic origin.....(10(____-1
No, not of Hispanic origin.....____-2
Not sure.....____-3

F14. Do you consider yourself white, black, Asian, or what?

White.....(11(____-1
Black.....____-2
Asian or Pacific Islander.....____-3
American Indian or Alaskan native....____-4
Not sure.....____-5

T1a. Are there any children under 20 years of age living in this household, or not?

Yes.....3*(12(___-1 } (ASK Q.T1b)

No.....___-2
Not sure.....___-3 } (SKIP TO Q.T2)

T1b. How old are they? RECORD SEPARATELY BELOW FOR EVERY CHILD UNDER 20 YEARS OF AGE

Child #1 /__/__/ (13-14)
Child #2 /__/__/ (15-16)
Child #3 /__/__/ (17-18)
Child #4 /__/__/ (19-20)
Child #5 /__/__/ (21-22)
Child #6 /__/__/ (23-24)

NONE/NO MORE = 0
LESS THAN 1 YEAR = 98
NOT SURE = 99

T2. Do you or does any adult in this household currently work full-time for an organization with 1,000 or more employees nationwide? I'm not talking about people who work for the federal government, for a public school system, or who are on active duty with the armed forces.

Yes, someone in household currently employed in organization with 1,000 or more employees nationwide.....(25(___-1

No, no one in household employed in such an organization.....___-2

Not sure.....___-3

T3. Thinking about the adult 18 and over in this household who travels most frequently, in the past twelve months how many trips has that adult taken within the continental U.S., Canada, or Mexico, where they spent at least one night away, either mainly for vacation or other personal reasons or for some combination of personal and business travel?

1 trip.....(26(___-1
2 trips.....___-2
3 trips.....___-3
4 trips.....___-4
5 trips.....___-5
6 trips.....___-6
7 trips.....___-7
8 trips.....___-8
9 trips.....___-9
10 or more trips.(27(___-0
None.....___-1
Not sure.....___-2
Refused.....___-3

T4. Again thinking about the adult 18 and over in this household who travels most frequently, in the past twelve months how many trips has that adult taken to Alaska, Hawaii, the Caribbean, Europe, the Pacific, or any other destination outside North America where they spent at least one night away, either mainly for vacation or other personal reasons or for some combination of personal and business travel? (IF NECESSARY: We're asking about any traveling the adult who travels most frequently might have done outside the continental United States, Canada, or Mexico in the past twelve months.

1 trip.....(28(____-1
2 trips.....____-2
3 trips.....____-3
4 trips.....____-4
5 trips.....____-5
6 trips.....____-6
7 trips.....____-7
8 trips.....____-8
9 trips.....____-9
10 or more trips.(29(____-0
None.....____-1
Not sure.....____-2
Refused.....____-3

That completes the interview. Thank you very much for your cooperation!

Time Ended:_____A.M./P.M.

SELECTED PRESS CLIPPINGS

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—Allen H. Neuharth
Founder, Sept. 15, 1982

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USA TODAY'S BRIEFING ON WASHINGTON

Quayle soothes Israel lobby group

USA TODAY
QUAYLE: 'Fellow Zionists' greeting

Vice President Quayle did some fence-mending with Israel Tuesday, leaving President Bush and Secretary of State James Baker to play the heavies on policy differences with the government of Prime Minister Yitzhak Shamir.

Quayle greeted 2,000 members of the America Israel Public Affairs Committee, one of Washington's biggest lobbying groups, as "fellow Zionists," generating enthusiastic applause.

He minimized the strain between the longtime allies over U.S. refusal to grant Israel loan guarantees to absorb new immigrants while Israel continues settlement of occupied territories: "One detects a feeling of uncertainty, reservation, doubt — even foreboding" in the relationship, he said. But, "our alliance is unshakable."

The loan guarantee request shriveled when Bush made it clear he would veto the legislation unless Israel vowed to halt settlements, which the administration considers obstacles to the Middle East peace process. After listening to Quayle, Sen. Robert Kasten, R-Wis., sponsor of a bill to grant Israel $10 billion in loan guarantees, said he plans to revive the issue. "I hope we can put together a compromise — in committee, not on the (Senate) floor." — ***Marilyn Greene***

SENATE RETIREMENT: Sen. Timothy Wirth, D-Colo., has decided not to seek a second term, said state Democratic chairman Howard Gelt. "Tim Wirth has been a great representative for the state of Colorado, both as a senator and as a congressman," he said. "His absence in Congress will be a great loss." A recent Colorado poll showed Wirth, 52, leading his GOP opponent, state Sen. Terry Considine, by a 43-36% ratio. Wirth becomes the seventh senator to say he won't seek re-election; one other was defeated in a primary.

HEALTH CARE REFORM: Presidential candidates win no points on health care, according to a Louis Harris poll by two private, non-partisan health policy research institutions, the Kaiser Family Foundation and The Commonwealth Fund. The telephone poll of 2,000 adults conducted in February shows 68% "see no real difference" between GOP and Democratic health care reform proposals. Asked to name any political leader or candidate whose health reform proposal they support, 80% said no one. The poll has a 2% margin of error.

BAD CHECKS: About 150 members of the 435-member House of Representative have challenged an ethics committee count on their bad checks at the House bank, said Rep. Matthew McHugh, D-N.Y., acting panel head. More than 300 current and former members are facing disclosure for overdrafts. Appeals are based mainly on late crediting of deposits by the now-closed bank. McHugh said the panel hoped to have a public overdraft list finished before the end of the week but probably won't release it until after lawmakers have left town on their Easter-Passover break.

PATRIOT PERFORMANCE: The Army told the House Government Operations Committee it has slightly scaled back its assessment of the Patriot missile's success in the gulf war. The Army had said the missile was successful against 80% of the Iraqi Scuds fired at Saudi Arabia and 50% of those targeted at Israel. It now says the Patriot was successful against 70% of the Scuds fired at Saudi Arabia and 40% of those directed at Israel.

COMMENCEMENTS: President Bush will reach out to the college crowd and their parents in four commencement speeches: Miami's Florida International University, April 27; Southern Methodist University in Dallas, May 16; Notre Dame University in South Bend, Ind., May 17; and the Naval Academy in Annapolis, Md., May 27.

BOSTON GLOBE April 8, 1992
Boston, MA Circ: 516,981

For most, top fear is medical bills

Poll ranks job fears 2d to health fees

By Richard A. Knox
GLOBE STAFF

More Americans are worried about having to pay medical bills their insurance does not cover than are concerned about losing their jobs, according to a national poll released today.

More than 60 percent are worried that health insurance premiums will soar out of their reach, the poll also found, and half of those who have coverage think benefits will be cut back even as premiums rise.

The results underscore "a tremendous opportunity" for political candidates who can tap the public's growing concern about their own health security, said Dr. Drew Altman of the Kaiser Family Foundation, which cosponsored the survey with the Commonwealth Fund. But at this point, the poll found, Americans have identified no politician or party who has a health reform plan they think could control costs and guarantee coverage.

The inexorable rise in the cost of health insurance has "transformed health care into a middle-class pocketbook issue" and not merely an impersonal concern about the one in seven Americans who lack coverage, said Altman.

The poll found that 62 percent of Americans want the federal government to take the lead in reforming the nation's health care system, the same plurality that fears private insurance will become unaffordable. The survey, conducted by Louis Harris and Associates, involved 2,000 random telephone interviews and has a margin of error of 2 percentage points.

The results also show that the percentage of Americans who are unsatisfied with their own health care has doubled from 13 percent in 1987 to 26 percent today.

The cost of care or coverage is interfering with many Americans' ability to obtain medical care, the poll found. Extrapolating from the results, about 23 million people did not get needed care in the last year, 18 million of those because of financial reasons. About the same number said they or someone in their family had been refused care in the previous year because they did not have insurance or could not pay.

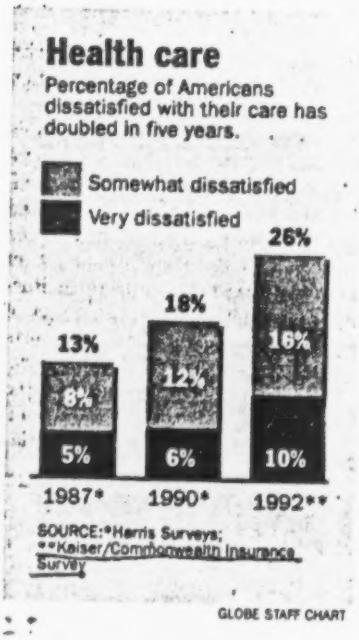
As other recent polls have found, the public is about evenly split on the three leading proposals for health care reform: single-payer, with the government replacing all private insurers; a plan requiring employers to provide coverage or pay a tax; and tax credits and vouchers, President Bush's approach.

Only 16 percent said they could see a difference between Republicans and Democrats in their approach to health care reform, even though the proposals put forward by leaders of each party differ radically in philosophy and scope.

Nevertheless, Altman argued, "it's wrong to say people are completely confused and misinformed" on health care reform.

"We're in the third inning of a nine-inning game," he said. "We haven't had the superheated national debate yet. When there are only two candidates arguing over philosophically opposed plans, the issues may crystallize."

"I think Americans are clearly saying they want change, that we need to do something about costs and that they are looking to the federal government to be able to help them out most quickly," said Donald White, a spokesman for the Health Insurance Association of America.



HEALTH CARE

Public Divided on Remedies for Curing an Ailing System

By EDWIN CHEN
TIMES STAFF WRITER

WASHINGTON—With Congress and the Bush Administration sharply divided over what to do about the nation's health care system, most observers had given up on significant reforms in this election year.

But there are indications that Congress is willing to try again. And a large new nationwide poll indicates there is ample political justification for doing so.

The survey of 2,000 Americans, conducted last month by Louis Harris & Associates, has found unprecedented public dissatisfaction with the status quo—an unhappiness that has doubled in just five years, to 26% of the population.

At the same time, the poll offered an explanation for the lack of support for any specific government action: The public is utterly confused about the many proposed remedies.

Those include a single-payer, Canadian-style system advocated by Sen. Bob Kerrey (D-Neb.); a requirement that all employers offer insurance or pay a special tax, advocated by many leading congressional Democrats, and a system of tax credits for the individual purchase of insurance, backed by President Bush. But 68% in the Harris poll said they "see no real difference" between Republicans and Democrats.

"The American public is just as divided as Congress as to what we should do," said Sen. John H. Chafee (R-R.I.).

"It'd be nice if everybody could agree—so the public can get behind one," said Sen. John D. (Jay) Rockefeller IV (D-W.Va.). "Everybody's incredibly frustrated about this."

The poll was commissioned by the Kaiser Family Foundation in Menlo Park, Calif., and the Commonwealth Fund in New York City. It found that:

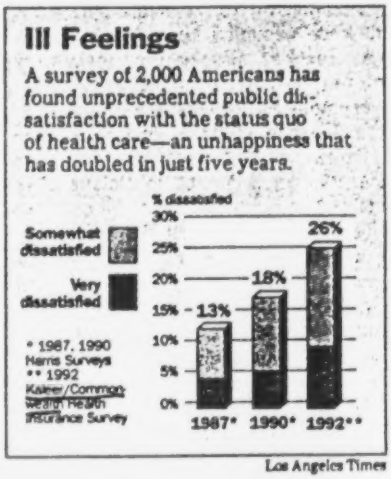
• 33% favor the employer mandate plan, 30% favor a single-payer approach and 27% favor tax credits. Only 2% are willing to "leave things the way they are."

• 62% want the federal government to "take the lead" while 30% look to the states. "The public is absolutely ready to settle this one," said Drew Altman, Kaiser Family Foundation president.

• 25% list health care as the most important issue in the November presidential election—second only after the economy, which was cited by 50%.

• By a margin of 75% to 22%, respondents favor the federal government setting the rates for health insurance premiums. They also favor government rate-setting for doctors and hospital fees and for prescription drugs.

Senate Majority Leader George J. Mitchell (D-Me.) and Rep. Dan Rostenkowski (D-Ill.), chairman of the House Ways and Means Committee, are moving to again test whether some consensus can be forged this session.



Chafee, a leading GOP activist on health care issues, believes progress can be made this year if Democrats and the Bush Administration search for points of agreement rather than wage an all-out battle.

A nudge toward some action soon will come from the influential League of Women Voters, whose president, Susan S. Lederman, said that the group's chapters throughout the country last weekend reached a consensus to begin a grass-roots lobbying effort. "The league is intensely interested in health care reform," she said.

Added Thomas W. Moloney, senior vice president of the Commonwealth Fund, "This is no longer a deferable issue."

NEW YORK NEWSDAY
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Wednesday, April 8, 1992
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Americans Divided On Health Care, Poll Says

By Dena Bunis
STAFF WRITER

Four out of five Americans don't believe any of the presidential candidates have the answer to the health care crisis and a vast majority believe that next to the economy, it's the country's most pressing problem, according to a nationwide poll released yesterday.

Conducted by Louis Harris and Associates for two major health philanthropies, the Henry J. Kaiser Family Foundation and the Commonwealth Fund, the poll also shows that 68 percent of the 2,000 people surveyed in February saw no difference between Democratic and Republican solutions to escalating health care costs, a blow to Democrats who have embraced this issue as their own.

"Harris Wofford showed there's a political opportunity here that so far hasn't been tapped by the candidates," said Drew Altman, president of California's Kaiser foundation, referring to Wofford's successful Pennsylvania Senate campaign in which health care was the key issue. Altman said health could be a particularly important factor in a close race.

The three major proposals to reform the health care system, expected to cost Americans $800 billion this year, all received about equal support.

The so-called play-or-pay plan supported by Arkansas Gov. Bill Clinton, under which employers would be required to provide health insurance or pay into a public fund, was favored by 33 percent. A single-pay or national health insurance plan, supported by former California Gov. Jerry Brown, was favored by 30 percent; and President George Bush's plan to maintain a free-market health care system with tax credits for buying insurance was favored by 27 percent.

Other key findings include:

- 26 percent of Americans are dissatisfied with their own health care compared with 18 percent in 1990 and 13 percent in 1987.
- 61 percent are concerned that insurance will get so expensive they won't be able to afford insurance, and 50 percent are worried about their health benefits being substantially reduced.
- In 1991, 54 million people postponed care they needed because they couldn't afford it and 7 million Americans were denied health insurance because of a prior medical condition.

Deborah Wadsworth, executive director of New York City's Public Agenda Foundation, which has spent two years researching the health issue, says the public doesn't understand any of the plans and the overriding public opinion is mistrust of the system.

"The people of America don't believe there is a cost crisis," Wadsworth said. "They believe there is a profits crisis." Consumers all across the country believe that if all the greed and waste were cut out of the system, there wouldn't be a crisis, she said.

SAN FRANCISCO EXAMINER Sunday, April 5, 1992

Health care crisis: Firms are dumping sick people

Insurers weed out those with medical problems by vastly raising premiums

By Jayne Garrison
EXAMINER HEALTH WRITER

Helen Konowitz was newly married and contemplating children when she first wondered whether her Kaiser health plan would satisfy a growing family.

A friend told her about a terrific insurance policy offered through the UC-Berkeley alumni association: reasonably priced, a safe group policy, offering a wide choice of doctors. Helen and Gary Konowitz bought.

Several years later, their baby son, Michael, had a stroke — and their reasonably priced policy became one of their most costly investments ever.

Today their health insurance costs $13,020 a year.

"If we want any insurance for Michael, we're stuck," she said, watching her boy play with toys on the floor of their Marin County home. "But at some point we're going to throw up our hands and say, how much longer can we pay this type of money?"

The Konowitzes are caught in a practice that is stripping health insurance from families across America. Some insurers are separating the sick from the healthy, then raising rates until the sick can no longer afford their coverage.

The practice is expanding to people on larger policies, once thought to be more secure than individual insurance. And it is being applied to people with less serious, though chronic, illnesses.

Critics dub this trend "divide and dump."

"Insurers are trying to segment everyone who needs insurance the most and get them off the policies," said Dr. Philip Lee, director of the Institute of Health Policy Studies at UC-San Francisco.

"It's widespread. It's getting worse. And it's undermining the whole health insurance system."

No one knows exactly how many Americans risk being dumped off their health insurance policies. The Health Insurance Association of America says such creaming of the healthy from the sick is "atypical."

But university researchers believe the number is rising dramatically. Economists say 34 million to 37 million Americans have no health insurance.

Now, a new national survey by the Kaiser Family Foundation found that 5 percent of working adults — 6.8 million people — say they have been denied health coverage because of a medical condition in the last two years. And 6 percent — 8.2 million people — said at least one member of their family has been dropped by their insurer in that period.

Even for those who can pay the spiraling premiums, health insurance is becoming "no more than a credit card," warns Alan Katz, head of the California Association of Health Underwriters, which advocates legal reform.

In essence, he said, some insurers are saying, " 'You go into the hospital, we'll pay your bills. But come renewal time, we'll raise your premiums to cover that bill. You'll pay us back in installments.' It's no longer insurance."

Health economists say the practice of weeding the sick from the well began, on a tiny scale, back in the 1950s when some commercial insurers started rejecting less-healthy people from individual policies.

It spread to larger group policies offered by associations in the late 1980s, when rising medical costs led many major corporations to self-insure their own workers, and caused others to switch in droves to cheaper health maintenance organizations such as Kaiser or Bay Pacific.

Those who remained behind on traditional commercial insurance plans were, often, less healthy, with a history of medical problems. No other insurer would take them. For families such as the Konowitzes, the choice is simple and grim: Pay high premiums or risk going without health insurance altogether.

An American tale

The Konowitzes are being slowly squeezed off their policy because Michael, now 5, had two strokes as a toddler: one when he was 18 months old and one when he was 3.

His therapy bills topped $80,000, treatment that could have bankrupted the family. His neurologists cannot explain why he had the strokes. Nor can they guarantee he will never have another stroke. But they do say the odds are even that he will not suffer a repeat.

He enters kindergarten this fall as a bright boy who has had only the normal tumbles and colds for the past two years. He has just started ski lessons. But his medical history renders him uninsurable in today's market.

The policy the Konowitzes bought in 1983 was advertised as a group plan available to UC alumni who weren't getting insurance through their jobs. The price: about $700 a year.

Gary Konowitz was just beginning his own business as an accountant. Helen Konowitz, who worked as an accountant, wanted to stay home after she had children. The policy seemed designed for families like theirs, she recalls.

In 1988, the premium escalated about 40 percent. The administrators of the plan, Association Consultants Inc. of Chicago, told members it was having trouble finding an insurance company that would take the group. ACI invited members to reapply for a new, cheaper policy.

'Medically underwriting'

But when Helen Konowitz phoned to inquire, she was told the insurer of the cheaper plan was "medically underwriting," a term that means people with medical problems are excluded.

"Without ever directly saying, 'No, we won't accept you,' they made it very clear there was no hope of our ever being put in that group," she said.

She called other insurers and brokers. One told her they *might* insure Michael as a teen-ager *if* he had no medical bills for 10 years. Gary Konowitz considered abandoning his own business and going to work for a corporate client — until he learned that they, too, required medical underwriting before accepting employees on their policy.

In 1990, the Konowitzes received notice that their premiums were rising to $14,000 a year. Gary Konowitz dropped off the policy, bringing the premium down to $9,068 — but only temporarily.

Today the Konowitzes pay $11,400 a year just to insure Helen and Michael. Gary Konowitz has a separate policy through a different company for $1,620 a year, bringing their total annual health insurance expenses to $13,000.

Helen Konowitz said she doesn't know how long they can afford the policy, particularly if rates keep rising. In search of some safety, she said her husband may find a job with a large corporation, if he can find one that will take Michael on their insurance plan.

In the end, less desirable

Herbert Barker, director of the California Alumni Association at UC-Berkeley, said the Konowitzes' plan changed insurers several times, yet kept getting hit with increases because members of the group were getting older. Most members, thousands of graduates from throughout the UC system, had joined in the 1970s.

In a desperate attempt to help some alumni, he said, the associations allowed ACI to offer a new cheaper group plan to those who could qualify. But in the end, that tactic simply made the original group even less desirable to insurers and far more costly to its diminishing membership.

"We felt the insurer was, in fact, doing a detriment to our group," Barker said. "But some of our members can't go anywhere else. We can't drop the policy and risk cutting them off."

No legal protection

The practice of creaming the healthy from the sick on group plans "is not ethical, not acceptable, but perfectly legal and done all the time," said Walter Zelman, health adviser to California Insurance Commissioner John Garamendi.

Zelman explained that state law forbids insurers from setting different rates for people on the same group plan. But insurers can easily circumvent the law by offering a new policy to group members. Only the healthy are accepted. Soon the original group has been divided into two, three or four groups.

"When only the sick or bad risks are left on the original policy, the price goes through the roof," he said.

This has happened with so many policies offered by associations that brokers no longer call insurance sponsored by anyone other than a big employer a group plan. Today those policies are called "association insurance" or "franchise insurance" and they are among the riskiest of policies.

"It's a way to get around the protection of state law for individual insurance policies," said Brent Barnhart, lobbyist for Blue Cross of California. "They're sold as large, safe policies, but there's really no one behind them except the insurer. Those who are healthy get a nice plan. Those who aren't end up with nothing."

Some in the insurance industry, such as Barnhart and Alan Katz, are pushing reform of insurance laws to guarantee affordable policies for small businesses and small groups of people.

The bills, now in a conference committee in Sacramento, would not stop insurers from dividing and dumping people on large group policies, Barnhart said. They might, however, take away the market for such predatory practices by making it easier for self-employed people to buy small group policies.

A 'foolproof reform'

Other experts, such as state Insurance Commissioner Garamendi and Princeton economist Uwe Reinhardt, say the only foolproof reform is some law that guarantees health insurance for every citizen — funded either by taxes or privately — and regulates the price.

"We have erected everywhere in America the sign: Payment is due at time of treatment," said Reinhardt. "We have allowed the insurance industry to impose an ethic on us that I don't believe we support. It's an ethic that says the patient is a consumer who is opting for treatment, and thus should pay what they use — as if a woman with cancer opts for her condition."

It is a dilemma Helen Konowitz understands, even as it frustrates her. "I know that people who are healthy don't want to pay any more than they have to. I know they don't want to be in groups with sick kids," she said. "But they should know: There but for the grace of God go I."

INSURANCE IDIOMS

Wonder what's going on with health insurance today? Here are some industry terms that might help explain it.

▶ **CHERRY PICKING:** Accepting only healthy people on insurance policies. Also known as medical underwriting. Insurers go through applicants' medical records. They reject people with a history of medical problems as spoiled.

▶ **CREAMING:** The process of dividing the healthy people from the sick people on an insurance policy. Everyone is invited to reapply for a new low rate. The healthiest are accepted onto the new insurance plan. Those who've been ill are left on the original group plan. Their premiums rise.

▶ **SKIMMING:** Same as above.

▶ **CHURNING:** When people and businesses switch insurance carriers often, sometimes every year, in search of ever-lower rates. This, in turn, encourages insurers to cherry pick and cream.

▶ **EXPERIENCE RATING:** When insurance rates are based on the actual medical bills of individuals or companies. There are two types:

▶ **TIERED RATING:** When people and businesses pooled in the same insurance plan are charged different rates based on their health. For example, someone with high blood pressure would pay more than a person with low blood pressure.

▶ **POOL RATING:** When people or businesses pooled together are charged the same rates, but the premiums for all rise when any individual gets seriously ill.

▶ **COMMUNITY RATING:** The way it was in the old days. Insurance rates were based on average medical bills of people in an entire region, such as Northern California. The risk was spread evenly among everyone living in that region. The sick paid no more than the healthy. This practice is largely extinct.

EXAMINER GRAPHICS

SAN FRANCISCO EXAMINER Wednesday, April 8, 1992

Worst fear of the middle class: losing health insurance

Health care fears hit new U.S. high

Poll shows issue remains untapped

By Jayne Garrison
EXAMINER HEALTH WRITER

Middle-class Americans are more worried about losing their health insurance than their jobs, according to a new Harris poll.

They want significant change in the health care system they fear is failing them, the survey found. But they don't know which reforms to support. And as yet, they don't have faith that any of the presidential candidates has a plan that will fix the trouble.

"What we're seeing is the fact that our health care system is failing the middle class. Health reform is becoming a voting, pocketbook issue for Americans," said Drew Altman, president of the Kaiser Family Foundation, which, along with the Commonwealth Fund, commissioned the poll.

Despite those rising worries, health reform remains "an untapped issue" in the 1992 presidential race, said Thomas Moloney, vice president of the Commonwealth Fund. Voters do not yet distinguish between the varied plans of the candidates, and, as a result, there is no pressure on candidates to make health reform a leading issue in the race, Moloney said.

"The poll indicates we're at the beginning of a three-to-five-year national issue," he said. "But it's here, and it's building. The public has moved from being concerned into being actively worried."

The telephone survey of 2,000 adults nationwide, conducted in February, is the first major poll to document a deep sense of insecurity about health care among working Americans who have health insurance.

Moreover, its findings suggest that growing gaps in health coverage affect far more than the estimated 34 million to 37 million Americans who are uninsured:

- 18 percent of working adults, or 25 million people, said the issue of health insurance had limited their careers. Half said they hadn't searched for a new job for fear of losing their employer's insurance. Others said they had been turned down for jobs because of a medical problem.
- 30 percent said they had postponed medical care last year for financial reasons.
- 15 percent said either they or a family member had been refused care in the past year because of financial reasons.
- 5 percent, representing 7 million Americans, said they had been denied health insurance because of a prior medical condition.

Poll shows concern over health system

"There's an ever-broadening net of Americans who are having problems and are real scared," Altman said. "And there's one issue for them: cost. People are afraid they won't be able to pay for the care they or a family member need."

In a surprising contrast during a recession, only a third of those surveyed said they were afraid of losing their jobs, while 61 percent said they were worried insurance would become so expensive they couldn't afford it. Half fear they will have to pay high medical bills not covered by their insurance.

For the first time, a significant number of Americans — 26 percent — said they were dissatisfied with the medical care they receive. That is double the number who indicated they were dissatisfied in a Harris poll five years ago.

And for the first time, more than half of Americans — 55 percent — said they would be willing to accept limits on their choice of doctors and hospitals in return for lower costs.

The poll indicates health care reform is rising as a national issue but is not yet sharply focused enough to shape campaigns.

Overall, health care ranked second only to the economy in people's concerns. Sixty-two percent of those surveyed said the federal government should take the lead in crafting reforms.

But beyond that, people showed fairly equal preference for vastly different ideas, from simple tax credits for health insurance to government-run health insurance programs like Canada's. Four out of five people surveyed couldn't think of any candidate whose health plan they supported.

"It shows that people are not terribly ideological about this," said Dr. Mark Smith of the Kaiser Family Foundation. "People want something that will solve their problem. They don't know exactly what they want. They just know they want politicians to take care of it."

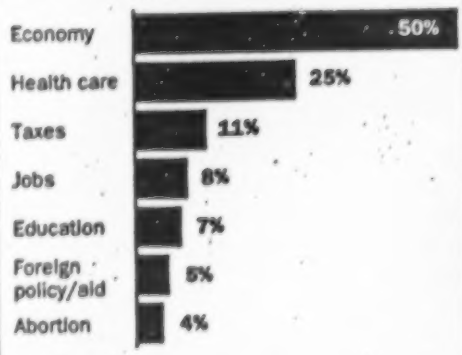
That general confusion over how to reform health care in America allows candidates this year to hammer each other on the economy and such issues as political integrity, the analysts said. No candidate has attempted to turn health reform into a major plank on his platform.

Still, Altman and Moloney said the public's concern was having a gradual, measurable political effect.

VOTER VIEWS

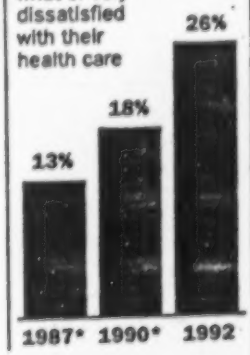
Results of 1992 Kaiser/Commonwealth Health Insurance Survey of 2,000 Americans, except where noted.

In the 1992 presidential election, what two issues do you think will be of most importance to you in determining who you will support?



Healthcare dissatisfaction

Percent of respondents saying they are somewhat or very dissatisfied with their health care



*Harris Surveys

Total responses exceed 100% because respondents were asked to name two issues

EXAMINER GRAPHICS

WHERE CANDIDATES STAND ON HEALTH REFORM

Democrats

Jerry Brown

National Health Insurance: Offer national health insurance, run by the government, to all Americans. Health insurance would no longer be a job benefit. Everyone – individuals and corporations – would pay for national health insurance through taxes, and everyone would be covered. Health benefits and physician's fees would be set by the government. Private insurance would no longer exist.

Bill Clinton

Pay or Play: Require employers and workers to buy health insurance as a job benefit or pay into a national fund. Those without insurance through work would buy policies from the government. Create a federal board to set health budgets for each state, and regulate the use of high-cost medical technology. Require insurers to sell policies to everyone, regardless of their health.

Republicans

Pat Buchanan

Tax credits: Let individuals deduct the cost of health insurance from their taxes and companies open tax-free medical accounts for workers. Individuals would pay for most of their insurance. The government would pay families perhaps 75 percent of nursing home costs for caring for elderly relatives at home. Insurance policies would be transferable to new jobs.

George Bush

Tax credits: Allow tax deductions up to $3,750 for families who buy medical insurance. Provide a government voucher worth $3,750 to poor families for health insurance. Require insurers to sell policies to anyone willing to pay, regardless of their health. Set fixed budgets for Medicare and Medicaid, the government's health plans for the elderly and the poor, and urge people on those plans to join less expensive health maintenance organizations such as Kaiser Permanente.

EXAMINER GRAPHICS

SAN FRANCISCO CHRONICLE Wednesday, April 8, 1992

Survey Finds Health Care Is a Top Issue

By Sabin Russell
Chronicle Staff Writer

Health care ranks just behind the economy as a national concern this election year, but voters are uncertain about proposed reforms or where candidates stand on the issue.

That is the conclusion of a new Louis Harris poll commissioned by the Henry J. Kaiser Family Foundation in Menlo Park.

"It says very clearly that a broad cross section of Americans are concerned, if not scared, and they don't see anybody with an answer out there," said Kaiser Foundation President Drew Altman.

Results of a telephone survey sampling 2,000 Americans found that 61 percent worry that health insurance will become so expensive that they will not be able to afford it.

Half fear that their health care benefits will be cut back substantially. More Americans are worried about expensive medical bills (50 percent) than fear they or their spouse will lose their jobs (33 percent).

When asked what two issues will count most in the November national elections, voters cited the economy 50 percent of the time and health care 25 percent. Taxes were mentioned 11 percent of the time, jobs 8 percent and education 7 percent.

But there was no clear preference for health care reform options. The so-called play-or-pay approach, supported by many congressional Democrats, received the approval of only 33 percent of those polled. It would require businesses either to provide health insurance or to pay a tax to support a government insurance program.

Support for a Canadian-style system that replaces private insurers with a single program financed by taxes was backed by 30 percent, and President Bush's plan to offer tax credits for individuals to buy health insurance was favored by 27 percent.

Despite the depth of feeling about the health care system, the public sees no differences between presidential candidates on the crucial issue.

"Because the presidential election is focusing on character and personality, a political opportunity for reform could be lost," said Altman. "No candidate has yet tapped this strongly held public concern."

A similar poll released Monday by Public Agenda Foundation of new York also found widespread public confusion about health care reform. Although the Gallup poll found 75 percent of the public favors "national health insurance," only 31 percent defined it the way most experts do: as a universal access system paid for by taxes.

Poll: Health-care worries on the rise

Fort Lauderdale Sun-Sentinel

WASHINGTON — Americans have a growing fear of rising health costs and decreasing medical benefits, a nationwide survey to be released Wednesday shows.

"We've passed through Phase 1, when most Americans could afford to take a detached look because they were someone else's problems," said Thomas Moloney of the Commonwealth Fund, a non-profit health group. "People are actively worried now about themselves and their families."

They may be worried, but the survey shows people also are confused about the best way to solve a growing problem.

Those surveyed are divided on the three leading options for health insurance reform: play-or-pay, in which businesses provide insurance or pay a tax to cover the uninsured; single payer, with the government as the insurer; and President Bush's tax credit plan. Sixty percent of them place the responsibility on the federal government.

The health plans and results of the survey will be discussed Wednesday in "Condition Critical: The American Health Care Forum." The show is scheduled from 9 p.m. to 11 p.m. on PBS. Viewers can call (800) 866-8877 to give their opinions on health care. In the Bay Area, KQED, Ch. 9, will carry the show.

The survey of 2,000 people was conducted Jan. 31 through Feb. 24 by Louis Harris for the Commonwealth Fund and the Kaiser Family Foundation, another non-profit health group.

Results show:

- Sixty-one percent are concerned health insurance will become so expensive that they will not be able to afford it.
- Seventy-five percent think the government should set rates for health insurance premiums.
- Of those who are insured, one of every two are concerned that benefits under their current health plan will be cut.
- Seventy-three percent think the government should set prices for prescription drugs.

THE SACRAMENTO BEE Wednesday, April 8, 1992

Poll: Americans angry, confused on health costs

By Ellen Robinson-Haynes
Bee Medical Writer

Americans are angry, confused and afraid about their health care.

New opinion polls released today by two of America's most prestigious public policy research foundations also show that for the first time health care has emerged as the No. 2 issue in the presidential campaign – right after the economy and surpassing fear of war.

"Only occasionally does another issue break through," said Drew Altman, president of the California-based Henry J. Kaiser Family Foundation. "In the '60s it was civil rights and in the '70s the environment. Now it's health.

"That means we have a three- to five-year window of opportunity to seize on that momentum and really make something happen."

But there is widespread confusion and disagreement about just what that should be.

The Public Agenda Foundation, a nonpartisan research and education organization that just concluded a two-year study about health care, suggests that the national debate on the issue is badly off course.

"We found," said PAF researcher and vice president Jean Johnson, "that among the leadership there is a very clear and crystallized debate. People may disagree, but they know what's at issue among a national health insurance plan, a pay-or-play plan, or modifications to our present system.

"But, we found, among the public not only are a lot of people a little misty about what the proposals are, but they come to the issue with basic misconceptions."

The public doesn't know, PAF found, that this nation annually spends twice as much money on health care as it does on defense. Health consumers also believe that they are paying 70 to 80 percent of their medical bills and insurance premiums in out-of-pocket dollars when it's actually employers and the government that foot 70 to 80 percent of the bill.

"Leaders are concerned about what government and businesses are spending on health care," said Johnson. "But these considerations are not really in the public mind.

"We find that the majority are calling for the government to spend more. Sharing the cost is just not something that the public understands very well. And they dramatically underestimate what is spent by employers on worker benefits."

Public Agenda Foundation, which focuses on ways to educate the public about policy issues, released its findings today as part of the kickoff of a national campaign called Condition Critical: the American Health Care Forum. Among their research were results of a public telephone survey of 1,000 Americans conducted in June of 1991 and January of this year.

Sponsored by the California Health Decisions, the campaign will include a year-long survey to determine where Californians stand on health care issues.

Kaiser Family Foundation's survey – which found that Americans see little difference in the health-care reform proposals offered by Democrat and Republican candidates during this primary season – included a 2,000-person poll conducted from Jan. 31 to Feb. 24 this year by Louis Harris and Associates.

"We are at an early phase in the debate over health care," said Altman. "I call it the Madonna phase – people are striking a pose. But when we get beyond the primary, things will crystallize in a much better way."

Both the Kaiser and Public Agenda studies found growing dissatisfaction among Americans surrounding their own health care. Kaiser found that an estimated 50 million Americans have postponed getting medical care for financial reasons. And, it found, an increasing number of Americans are more worried they will have to pay very expensive medical bills not covered by insurance than that they or their spouse will lose their jobs.

Americans attribute the decline in the nation's health-care system to what they believe to be widespread waste, greed and abuse, rather than the well-documented escalating costs of developing high-tech medicine and treating an aging population.

BUSINESS WEEK
New York, NY

April 20, 1992
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Washington Outlook

EDITED BY STEPHEN H. WILDSTROM

CAPITAL WRAPUP

THE SENATE

Republican hopes for eking out a gain in this fall's Senate elections are getting a boost from some surprise Democratic retirements. On Apr. 7, Colorado's Tim Wirth became the seventh of 34 senators up for reelection this year to announce that he won't seek it. The freshman Wirth faced a tough race against Republican State Senator Terry Considine. Just a few days earlier, Democrat Kent Conrad threw North Dakota's politics into turmoil by announcing that he wouldn't seek a second term. Conrad's reelection had been regarded as virtually certain, but his decision to quit gives the GOP a decent shot at the seat. The third recent retirement, that of New Hampshire's Warren B. Rudman, is likely to have no impact on the partisan balance because GOP Governor Judd Gregg is heavily favored to win and keep the seat in the GOP column.

But the Republicans, who currently hold only 43 Senate seats, still have major vulnerabilities. Bob Packwood continues to struggle in Oregon. And in Wisconsin, half the voters polled by the *Milwaukee Journal* believe two-term Republican Bob Kasten has done a less-than-good job. He leads Democratic Representative Jim Moody only 46% to 34%, a very weak showing for an incumbent.

HEALTH CARE

The public may not know exactly what kind of health care system it wants, but voters definitely think government should fix the mess. That's the message of a Kaiser Family Foundation/Commonwealth Fund survey in which 60% said government should play a primary role in offering insurance and controlling costs. Just over 30% said government was mainly to blame for health care woes, with doctors finishing second at 25%. But voters split nearly evenly among the three major reform approaches—"play or pay," a Canadian-style national system, or tax credits to buy private insurance.

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Worried about health care

Most Americans expect government to make care affordable: Poll

By CHRISTINE WOOLSEY

WASHINGTON—Most Americans worry they will not be able to afford health insurance in the future and say the federal government should take responsibility for health system reform, according to a new survey.

Sixty-one percent of individuals surveyed said they worry that health insurance will become unaffordable, while 50% said they worry that they will be stuck with very expensive medical bills not covered by health insurance.

Most Americans—60%—said they expect the federal government—not state governments or the private sector—to take the lead in reforming the nation's health care system, including providing health insurance to all Americans and controlling health care cost increases, the Harris poll found.

However, opinion is about evenly divided on which of three leading options for health insurance reform is preferable.

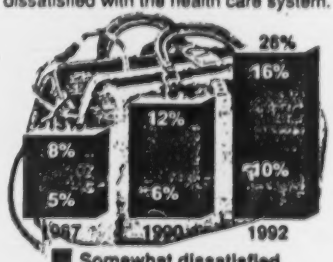
Thirty-three percent of the people surveyed said they would favor a national health plan in which employers are required to either offer private health insurance or pay a payroll tax to support a government program—the so-called play-or-pay approach.

Meanwhile, 30% said they would favor a single-payer national health plan financed by taxpayers in which

Continued on page 74

Health care frustration mounts

Americans are growing more dissatisfied with the health care system.



Source: Louis Harris & Associates Inc., The Henry J. Kaiser Family Foundation and The Commonwealth Fund

GRAPHIC BY JOHN SMITHER

Health care poll

Continued from page 1

all Americans would be insured through one government plan.

And 27% said they would favor President Bush's proposal to offer low- and moderate-income uninsured Americans tax credits and income tax refunds to help purchase private health insurance.

Only 2% of those surveyed said the health system should be left as it is. Eight percent did not respond.

The lack of consensus puts policymakers in a quandary, said Thomas W. Moloney, senior vp of the Commonwealth Fund, a New York-based philanthropic group that co-sponsored the survey.

"It makes policymakers afraid to do anything. They are afraid they will have 'Son of Catastrophic' meet them in the parking lot," he said, referring to the outrage of upper-middle- and upper-income retirees about the big tax bite they would have paid under the 1988 Medicare Catastrophic Coverage Act.

Making matters worse is that conviction behind any one reform proposal is "wafer thin," Mr. Moloney noted. "There is no salience to their answers. As soon as you ask a follow-up question about one of the proposals, they move away from their choice."

For example, two-thirds of those who favored a play-or-pay approach said they would not favor such an approach if it would hurt small employers that could afford neither a private health plan nor a payroll tax, Mr. Moloney said.

The survey, released April 8, is based on 2,000 telephone interviews done between Jan. 31 and Feb. 24 by Louis Harris & Associates Inc. The Henry J. Kaiser Family Foundation, a national philanthropy based in Menlo Park, Calif., co-sponsored the survey with the Commonwealth Fund. The Kaiser Foundation is not associated with Kaiser Hospitals or Kaiser Permanente Medical Care programs.

The survey coincides with the 1992 presidential campaign in which health care has emerged as a prominent issue. In fact, the survey reported, 25% of respondents ranked health care as one of the two most important issues in the presidential election, second only to the economy and far ahead of other major issues, like taxes, jobs and education.

But, according to the survey, the public at this point sees no real difference between the health reform proposals of any party or candidate. And 80% of respondents say no political leader or candidate has a proposal for health care reform they support.

While most Americans—71%—are satisfied with the health care services they and their families have received in the last few years, a growing number are are dissatisfied, the survey reported. Some 26% of respondents reported being very or somewhat dissatisfied with health care services, including cost, access and quality, double the 13% who said they were dissatisfied in a 1987 poll (see chart, page 1).

That increasing dissatisfaction indicates that "the whole health reform issue in the minds of the public has moved from an armchair concern about others' problems to a real concern about themselves," said Mr. Moloney.

For example, 48% of individuals worry they will not be able to afford the health care they will require when they become very ill. And, 39% feared their health plan would refuse to insure them if they incurred large medical bills.

Even individuals who are covered under employer-sponsored health plans are anxious. "The firewall of health insurance is eroding—even for people with private health insurance," Mr. Moloney said. Some 26% of those surveyed said they feared their employers would drop their health plans.

Twenty-five percent rank health care as one of the two most important issues in the election.

Health insurance benefits influenced the career moves of 18% of the people surveyed, said Mr. Moloney. Nine percent said they did not take a better job because the health insurance was not as good as their current plan. And 5% said they are trying to change jobs strictly to improve their health insurance benefits.

At the same time, few individuals realize that increasing health care cost pressures are affecting employers' profits, Mr. Moloney said. Only 31% said they felt their raise last year was in any way affected by the rise in health insurance premiums paid by employers.

"If we are to do something about (the health care crisis) nationally, more of us have to understand that increasing health insurance premiums are eroding wages," Mr. Moloney said.

The survey indicates that people may be more willing to accept managed care if it means lower out-of-pocket costs. Fifty-five percent said they would be interested in a health plan that limits their choice of providers in return for real savings.

"This says to me that employees who even a couple of years ago may not have actively endorsed managed care may have changed their minds," Mr. Moloney said. "If I were an employer, I'd revisit this issue with my workers."

Americans are evenly split about who is to blame for the current health care system's ills, the survey found, though the government tops the list of scapegoats. Thirty-one percent include the government when spreading the blame, 25% blame doctors, 23% blame insurers, 15% blame hospitals and 25% blame "others."

While the public says it wants the government to have a primary role in solving the health care crisis, respondents weren't asked if they felt the government would do the best job, Mr. Moloney noted. "It wasn't a 'Who could do it better?' question. It's more like, if you feel you are about to drown, you call the party with the biggest boat to come get you.

"My interpretation is they want the government to be a better referee—not necessarily to put on a football uniform."

Americans want the government to take a more active role in regulating the price of health insurance and health care services, the survey found. For example, 75% say the government should set the rates health insurers can charge, 71% say the government should set the rates doctors and hospitals charge, and 73% say the government should set prescription drug prices.

"The public perceives the problem (of rising health care costs) as excess profits. But, in reality, if you took all the profits from all health insurers and drug companies, it would reduce national health expenditures by less than 2%," Mr. Moloney maintains.

"It's clear people are saying they want controls on the increases in health insurance premiums," commented a spokesman for the Health Insurance Assn. of America, a Washington, D.C.-based insurer trade group. "Unfortunately, the health insurance industry has to deliver the bad news" regarding health care cost increases by upping premiums. The blame insurers get is a bum rap, he said.

"The real problem of rising costs is driven by technological advances in medical procedures and drugs," Mr. Moloney said. "We have no methods to control that."

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Copies of the survey are available free from the Commonwealth Fund, Communications Office, 1 E. 75th St., New York, N.Y., 10021: 212-535-0400.

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DAN RATHER/ANCHOR: One thing everybody's talking about this election year is the lack of affordable health care. CBS News Health Correspondent Edie Magnus is here to tell us it's a make or break issue now for people who thought they'd never has to worry. Edie?

EDIE MAGNUS/HEALTH CORRESPONDENT: That's right Dan. Health care was once seen just as a problem for the uninsured, the disadvantaged. Those are people who tend not to vote, so the politicians didn't have to pay much attention to them or the issue. Not any more. Now there is evidence that huge numbers of Americans are fearful about holding onto their benefits and paying their bills.

For the first time, say researchers, Americans are realizing that health care is not just somebody else's problem.

TOM MOLONEY/COMMONWEALTH FUND: It's hit main stream insured America. The 80% of Americans who have insurance are now worried about their own situation.

MAN1: Any kind of sickness, be it minor or major, can pretty much wipe you out financially.

MOLONEY: They're worried that they're going to lose their insurance. They're worried they're not going to be able to afford their premiums.

STUDENT: I'm a student, and I haven't been able to afford health care, ever, since I went off my parents plan.

MOLONEY: They're worried their going to get sick, and their

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coverage is going to be full of holes.

WOMAN1: We can't get sick. We can't afford to pay for it right now.

MAGNUS: And a majority of Americans are looking to government, the federal government to make health care affordable, and accessible. So how do they view this year's crop of presidential candidates?

MAN2: If I had to choose any of them, it'd be none of the above.

MAGNUS: He's not alone. When asked is there any presidential candidate who's health care reform proposals you can support, 80% of Americans surveyed recently said, none. And asked if they see any real difference between Republicans and Democrats on health care, 68% said no.

WOMAN2: I think they spend more time talking about each other than they have trying to do, on health, the things that would help us.

WOMAN3: They all just want to please the public right now, and I don't think that anyone really has a set agenda for the health care issues.

MAGNUS: Those surveyed ranked health second only to the economy in importance this election year. So while health care could be a block buster issue for a presidential candidate so far no one stands to gain any votes from it. Dan.

RATHER: So Edie what do Americans want in the way of health care?

MAGNUS: Well actually they are not sure what they want. The survey showed that they are confused about all the various health care plans that are out there. They would like the government to put a lid on doctor fees, on hospital fees, on drug prices, but they don't want the government to run the system entirely. They are more certain about the problems at this point than they are the solutions.